DOCUMENT RESUME

ED 456 587 EC 308 571

TITLE	NIDRR Program Directory, Fiscal Year 1998.
INSTITUTION	National Inst. on Disability and Rehabilitation Research (ED/OSERS), Washington, DC.
PUB DATE	1998-00-00
NOTE	420p.
AVAILABLE FROM	National Inst. on Disability and Rehabilitation Research (ED/OSERS), 400 Maryland Ave., SW, Washington, DC 20202. Tel: 800-877-8339 (Toll Free); Web site: http://www.ed.gov/offices/OSERS/NIDRR/pubs.html.
PUB TYPE	Reference Materials - Directories/Catalogs (132)
EDRS PRICE	MF01/PC17 Plus Postage.
DESCRIPTORS	Adults; *Disabilities; Engineering; *Federal Aid; Federal Programs; *Rehabilitation; *Research and Development; *Research Projects; Technical Assistance; Technology
IDENTIFIERS	Americans with Disabilities Act 1990; *National Institute on Disability Rehab Research

ABSTRACT

This directory lists all projects funded by the National Institute of Disability and Rehabilitation Research (NIDRR) during the 1998 fiscal year. It includes summaries, funding data, and contact information for a broad range of programs. An introduction discusses the mission of NIDRR and provides an overview of its research program. Programs are then grouped into the following research priority categories: (1) employment outcomes; (2) health and function; (3) technology for access and function; (4) independent living and community integration; (5) associated disability research areas; (6) knowledge dissemination and utilization; (7) capacity building for rehabilitation research training; and (8) state technology assistance. For each category, information is provided on Rehabilitation Research and Training Centers, Disability and Rehabilitation Research Projects, and Field-Initiated Projects. Appendices provide a subject index, an index by grantees, an index of projects by state, an index by principal investigators, and a listing of projects by program type. (CR)

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ED 456 587

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NIDRR Program Directory
Fiscal Year 1998

National Institute on Disability and
Rehabilitation Research
U.S. Department of Education
Washington, D.C.

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Program Directory 1998

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Silver Spring, MD 20910
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or 301/495-5626 (TTY).

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Introduction

The mission of the National Institute on Disability and Rehabilitation Research (NIDRR) is to generate, disseminate and promote knowledge that will improve the lives of persons with disabilities in their communities. NIDRR conducts comprehensive and coordinated programs of research and related activities to assist in the achievement of the full inclusion, social integration, employment, and independent living of people with disabilities. This edition of the NIDRR Program Directory lists all projects funded by NIDRR during the 1998 fiscal year.

NIDRR's proposed Long Range Plan, announced in the Federal Register, 63 (206) on October 26, 1998 (http://www.ed.gov/legislation/FedRegister/), provides background on NIDRR's conceptual base. It describes the "new paradigm of disability," which instead of considering a disability as a deficit, asserts that disability may be encountered in a person's interaction with the environment. NIDRR's research focus includes such areas as: employment outcomes, health and function, technology for access and function, independent living and community integration, associated disability research areas, knowledge dissemination and utilization, and capacity building for rehabilitation and international activities. For detailed descriptions of these areas, consult the Long Range Plan.

NIDRR's Research Program

NIDRR's research is conducted via a network of individual research projects and centers of excellence throughout the country. Most NIDRR grantees are universities or providers of rehabilitation or related services. NIDRR's largest funding programs are the Rehabilitation Research and Training Centers (RRTCs) and Rehabilitation Engineering Research Centers (RERCs). NIDRR also makes awards for information dissemination and utilization centers and projects, field initiated projects, research and development projects, advanced research training projects, Mary E. Switzer fellowships, small business innovative research, and model systems of care. NIDRR also administers the State Technology Assistance Projects and the Disability and Business Technical Assistance Centers.

Disability and Rehabilitation Research Projects

The Disability and Rehabilitation Research Projects (DRRP) program allows for projects with special emphasis on research, demonstrations, training, dissemination, utilization, and technical assistance. Projects may include combinations of these activities. True to the mission of NIDRR, these projects may develop methods, procedures, and rehabilitation technology to assist in achieving the full inclusion and integration into society, employment, independent living, family support, and economic and social self-sufficiency of individuals with disabilities, especially individuals with the most severe disabilities or to improve the effectiveness of services authorized under the Rehabilitation Act.

Model Systems

NIDRR administers programs that have become world-renowned model systems of care for persons with spinal cord injuries, burns, and traumatic brain injuries. The Model Systems establish innovative projects for the delivery, demonstration, and evaluation of comprehensive medical, vocational, and other rehabilitation services. The work of the Model Systems begins at the point of injury and ends with successful re-entry into full community life.

Advanced Rehabilitation Research Training Projects

The Advanced Rehabilitation Research Training (ARRT) Program (formerly known as the Research Training Grants Program) expands the capacity of the field of rehabilitation research by providing advanced training opportunities. These projects provide rehabilitation research training for persons with clinical or other experience, who may be lacking certain formal research training. Grants are made to institutions to recruit qualified persons with doctoral or similar advanced degrees with clinical, management, or basic science research experience, and prepare them to conduct independent research on problems related to disability and rehabilitation. This research training may integrate disciplines, teach research methodology in the environmental or new paradigm context, and promote the capacity for Disability Studies and rehabilitation science. These training programs must operate in interdisciplinary environments and provide training in rigorous scientific methods.

Rehabilitation Research and Training Centers

NIDRR's Rehabilitation Research and Training Centers (RRTCs) conduct coordinated and integrated advanced programs of research targeted toward the production of new knowledge, which may improve rehabilitation methodology and service delivery systems, alleviate or stabilize disabling conditions, or promote maximum social and economic independence for persons with disabilities. Operated in collaboration with institutions of higher education or providers of rehabilitation or other appropriate services, RRTCs serve as centers of national excellence in rehabilitation research. Also, they are national or regional resources for research information for individuals with disabilities and the parents, family members, guardians, advocates, or authorized representatives of the individuals. These centers also conduct related training programs, including graduate, pre-service and in-service training . The centers also disseminate and promote the utilization of research findings.

Rehabilitation Engineering Research Centers

Rehabilitation Engineering Research Centers (RERCs) conduct programs of advanced research of an engineering or technical nature designed to apply advanced technology, scientific achievement, and psychological and social knowledge to solve rehabilitation problems and remove environmental barriers. Each center is affiliated with one or more institutions of higher education or nonprofit organizations. The RERCs' work in a rehabilitation setting provides an environment for cooperative research and the transfer of rehabilitation technologies into rehabilitation practice. Involved at both the individual and systems levels, RERCs seek to find and evaluate the newest technologies, products, and methods that ultimately can benefit the independence of persons with disabilities and the universal design of environments for all people of all ages. The centers also exchange technical and engineering information worldwide and improve the distribution of technological devices and equipment to individuals who need them.

State Technology Assistance Projects

Re-funded under The Assistive Technology Act of 1998, this program supports statewide, consumer-driven, technology-related assistance networks for individuals of all ages and disabilities. States and territories are eligible to apply for one grant per entity which spans a total of ten years of Federal funding. The first phase is a development grant and lasts for three years. The second phase is known as the first extension and can last for two more years. The third and final phase is known as the second extension and lasts for five additional years. The Assistive Technology Act of 1998 (AT Act) authorized three additional years for States that have completed ten years, at a reduced funding level.

Fellowships

Fellowships, named for the late Mary E. Switzer, give individual researchers the opportunity to develop new ideas and gain research experience. There are two levels of fellowships: Distinguished Fellowships go to individuals of doctorate or comparable academic status, who have had seven or more years of experience relevant to rehabilitation research. Merit Fellowships are given to persons with rehabilitation research experience, but who do not meet the qualifications for Distinguished, usually because they are in earlier stages of their careers. Fellows work for one year on an independent research project of their design.

ADA Technical Assistance Projects

NIDRR administers a network of grantees to provide information, training, and technical assistance to businesses and agencies with responsibilities under the Americans with Disabilities Act (ADA). Ten regional Disability and Business Technical Assistance Centers (DBTACs) are funded to provide information and referral, technical assistance, public awareness, and training on all aspects of the ADA. Several National Training Projects target particular groups, organizations, or subject areas for ADA training and the ADA Technical Assistance coordinator contract assists all of the grantees with their activities.

Small Business Innovative Research

Small Business Innovative Research (SBIR) grants help support the production of new assistive and rehabilitation technology. This two-phase program takes a product from development to market readiness.

NIDRR Contracts

Through its contracts, NIDRR seeks improved methods, systems, products, and practices to add to its work. The contracts are for specific activities related to management, research, and information dissemination.

NARIC and the *NIDRR Program Directory*

The *Program Directory* is compiled by the National Rehabilitation Information Center (NARIC). NARIC functions as NIDRR's library, providing the rehabilitation community with information and referral services to help locate pertinent research related to specific areas of expertise. Since 1977, NARIC has been the primary source of rehabilitation and disability information generated by NIDRR funds, with special priority services to NIDRR staff and NIDRR-funded project staff.

NARIC also produces a companion to the *Program* Directory, which is the *Compendium of Products by NIDRR Grantees and Contractors*. Copies of NIDRR-supported research products are received by NARIC and added to the reference collection and Compendium database. Information about holdings are available on line at http://www.naric.com/naric.

Neither NARIC nor NIDRR assumes liability for the *Directory's* contents or the use thereof. NARIC does not evaluate or certify the programs or products of the organizations listed in the *Directory*.

This *Directory* is not intended for use as a fiscal document to show how NIDRR funds are allocated; its purpose is to display the range of programs that NIDRR supports. This listing is current as of October 1, 1998.

NARIC operates under U.S. Department of Education contract ED-99-CO-0057.

Employment Outcomes

NIDRR seeks to improve employment outcomes for people with disabilities by funding research into the wide spectrum of employment and disability issues, including economics; Federal, State and community employment programs; accommodation; technology; education; and ergonomics and the work environment.

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Rehabilitation Research and Training Center for Persons Who Are Deaf or Hard of Hearing

University of Arkansas
4601 West Markham Street
Little Rock, AR 72205
dwatson@comp.uark.edu
http://www.uark.edu/depts/rehabres

Principal Investigator: Douglas Watson, PhD
Public Contact: 501/686-9691 (V/TTY); Fax: 501/686-9698

Project Number: H133B60002
Start Date: September 30, 1996
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 96 $650,000; FY 97 $650,000; FY 98 $668,963
Other funding: FY 98 $50,000 (Rehabilitation Services Administration)

Abstract: The Center identifies the employability enhancement needs of the target population, and discovers basic knowledge about these problems from the perspective of individual and environment. The Center translates this information into guidelines for change, assessment, and interventions, evaluates the appropriateness and effectiveness of the new methods, disseminates them to enhance service delivery, and evaluates their impact and implementation.

Research and Training Center on Maintaining the Employment Status and Addressing the Personal Adjustment Needs of Individuals Who Are Hard of Hearing or Late Deafened

California School of Professional Psychology-San Diego (CSPP-SD)
6160 Cornerstone Court East
San Diego, CA 92121-3725
rrtc@mail.cspp.edu
http://www.hearinghealth.org

Principal Investigator: Raymond J. Trybus, PhD
Public Contact: T. Jordon Goulder, PhD, Director of Training, 619/623-2777, ext. 388 (V); 800/432-7619 (TTY); Fax: 619/642-0266

Project Number: H133B70016
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $499,911

Abstract: This Center implements a series of projects involving hearing loss and workplace issues through collaboration with business, professional, and consumer organizations. The primary target populations are accessed through a network of schools and state agencies. Project examples include the identification of factors that have a negative impact on the employment status of people with hearing impairments. Data sources include affiliations through career planning at schools, patients in Veteran's Affairs hospitals, local minority communities, the Council of Latino Agencies, Howard University, and the University of Arizona Research and Training Center on Native Americans. Interventions include review of assistive technology, career planning, mental health, and "rights training" in relation to the ADA. The project provides workshops for families and employers, establishes support groups for people with cochlear implants, and creates a family life center project: a "one stop shopping" facility where individuals with hearing loss can obtain a variety of interventions, information, and guidance regarding services and devices. Dissemination includes information on the ADA and Tech Act. Training targets groups, including employers, consumers, and human resource organizations.

Rehabilitation Research and Training Center for Access to Rehabilitation and Economic Opportunity

Howard University
Holy Cross Hall, Suite 100
2900 Van Ness Street Northwest
Washington, DC 20008
swalker@law.howard.edu; kturner@law.howard.edu
http://www.law.howard.edu/HURTC/HURTC.html

Principal Investigator: Sylvia Walker, EdD
Public Contact: 202/806-8086 (V); 202/244-7628 (TTY); Fax: 202/806-8148

Project Number: H133B30093
Start Date: September 1, 1993
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 93 $596,070; FY 94 $606,000; FY 95 $596,000; FY 96 $580,000; FY 97 $580,000; FY 98 $300,000
Other funding: FY 94 $218,892; FY 95 $381,985; FY 96 $104,260; FY 97 $120,000
Abstract: Based on research findings, this project develops and tests effective rehabilitation service-delivery models that can be replicated by state and other rehabilitation agencies, in order to increase employment for African Americans, Hispanic Americans, and Asian Americans with disabilities.

Rehabilitation Research and Training Center on Disability and Employment Policy

Community Options, Inc.
1130 - 17th Street, Northwest, Suite 430
Washington, DC 20036
coisvp@aol.com
http://coptions.com

Principal Investigator: Robert Silverstein; Peter Blanck
Public Contact: Michael Morris, Project Director, 202/721-0120; Fax: 202/721-0124

Project Number: H133B980042
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $450,000
Abstract: This Center helps expand, improve, and modify disability policy and other more general policies in order to improve the employment status of Americans with disabilities and increase their independence and self-sufficiency. Based on research from this project and other NIDRR-funded projects, this project establishes an information and technical assistance resource to government leaders and decision makers at state and federal levels, individuals with disabilities, parents and family members, and other interested parties, offering new and revised approaches to workforce development and employment policy. Studies conducted by this project include: (1) an analysis of the relationship between select federal and state policies upon the employment of people with disabilities, (2) an analysis of the policy-based implications of outcome-based reimbursement on the delivery of employment and rehabilitation services to people with disabilities, and (3) an analysis of the effect of civil rights protections and multiple environmental factors on promoting or depressing the employment status of people with disabilities. The Center actively seeks to be outcome-focused and involve individuals with disabilities, parents, and family members in all facets of project activities, including training, research, information dissemination, and technical assistance.

Rehabilitation Research and Training Center on Educational Supports

University of Hawaii at Manoa
1776 University Avenue/UA4-6
Honolulu, HI 96822
stodden@hawaii.edu; huap-l@hawaii.edu
http://www2.hawaii.edu/~huap

Principal Investigator: Robert Stodden, PhD
Public Contact: Audray Holm; Valerie Shearer, 808/956-3975; 808/956-2641; Fax: 808/956-5713

Project Number: H133B980043
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $595,000
Abstract: The research this project conducts on educational supports is designed to increase access to postsecondary education programs and improve outcomes for people with disabilities. The research includes: (1) examining and evaluating the current status of educational supports, including (a) individual academic accommodations, (b) adaptive equipment, (c) case management and coordination, (d) advocacy, and (e) personal counseling and career advising; (2) identifying effective support practices and models of delivery that contribute to successful access, performance, and retention and completion of postsecondary programs; (3) identifying specific barriers to the provision of disability-related services, including policy and funding requirements; (4) assessing the effectiveness of promising educational practices and disability-related services that are important to career mobility and success in the workplace; (5) testing the effectiveness of specific models of delivery that are believed to increase the accessibility of educational supports and innovative technologies; (6) identifying the types of educational and transitional assistance that postsecondary programs provide to improve educational and subsequent labor market success; (7) providing training, technical assistance, and information to support personnel, public and private rehabilitation personnel, career placement specialists, and students with disabilities based on the findings and implications of the proposed research program; and (8) implementing a consumer-driven empowerment evaluation plan for assessment of the Center's progress in achieving its goals. Additional goals include conducting national surveys and field studies within diverse postsecondary educational settings, and implementing an innovative and integrated training, technical assistance, and dissemination model to ensure the application and sustainability of research-proven policy and practice.

Rehabilitation Research and Training Center on State Systems and Employment Outcomes

Children's Hospital
Institute for Community Inclusion
300 Longwood Avenue
Boston, MA 02115
kiernanw@a1.tch.harvard.edu

Principal Investigator: William E. Kiernan, PhD
Public Contact: 617/355-6506; Fax: 617/355-7940

Project Number: H133B980037
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $700,000
Abstract: This Center identifies effective practices in coordinated employment efforts and facilitates such development at local, regional, and state levels. It also influences policy, practice, and perceptions on the national level. Project activities include investigations, technical assistance, and public policy reviews focused on: (1) examining state service systems, including vocational rehabilitation, mental health, mental retardation, employment and training service (including one-stop career centers and welfare-to-work programs), and education to document promising policies and practices reflecting integrated and coordinated approaches to employment of people with disabilities; (2) documenting, through the analysis of national, state and local data collection systems, actual employment outcomes for people with disabilities; (3) documenting strategies state agencies use for overcoming barriers to employment at the state and local levels; (4) examining, documenting, and disseminating practices at the state level that respond to the employment and support needs of SSI and SSDI beneficiaries; and (5) reviewing and evaluating strategies and approaches to develop a more integrated employment approach at the federal and state levels, in order to enhance the employment of people with disabilities.

Rehabilitation Research and Training Center: Promoting Placement

Children's Hospital
Training and Research Institute for People with Disabilities
300 Longwood Avenue
Boston, MA 02115
kiernanw@a1.tch.harvard.edu; butterworth@a1.tch.harvard.edu
http://www.childrenshospital.org/ici/programs/research/rrtc

Principal Investigator: William E. Kiernan, PhD, 617/355-6506 (V); 617/355-6956 (TTY)
Public Contact: John Butterworth, PhD, Research Director, 617/355-7074 (V); 617/355-6956 (TTY); Fax: 617/355-7940

Project Number: H133B30067
Start Date: October 1, 1993
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 93 $100,000; FY 94 $400,000; FY 95 $475,000; FY 96 $400,000; FY 97 $205,000; FY 98 $205,000
Other funding: FY 93 $214,365; FY 94 $94,875; FY 95 $75,000
Abstract: The RTC examines strategies, methods, and outcomes of placement models and approaches for people with disabilities. It investigates, trains, and disseminates findings in the following major areas: (1) examination and evaluation of placement models with a specific emphasis upon serving people with severe disabilities in the changing labor market; (2) documentation of the best placement and follow-up practices for individuals with severe disabilities; (3) identification of employer practices and concerns addressing the issues of corporate culture, co-worker supports, and approaches toward assisting people with disabilities in assuming a full and integrated role within the work setting; (4) development of strategies that enhance the use, knowledge, and modification of technology and other job accommodation techniques used by rehabilitation counselors and agencies; (5) documentation of types of placements and the nature of placements completed by vocational rehabilitation agencies through a review of national data on placement; and (6) provision of technical assistance to vocational rehabilitation agencies to enhance skills of rehabilitation counselors and rehabilitation education in the identification, design, and implementation of job-placement strategies.

Rehabilitation Research and Training Center on Blindness and Low Vision

Mississippi State University
P.O. Drawer 6189
Mississippi State, MS 39762
rrtc@ra.msstate.edu
http://www.msstate.edu/dept/rrtc/blind.html

Principal Investigator: J. Elton Moore, EdD
Public Contact: 601/325-2001 (V); 601/325-8693 (TTY); Fax: 601/325-8989

Project Number: H133B60001
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 96 $650,000; FY 97 $650,000; FY 98 $676,736
Other funding: FY 96 $98,463; FY 98 $194,012 (Rehabilitation Services Administration)
Abstract: The Center conducts a series of research, training, and dissemination projects relating to blindness and low vision, using a multidisciplinary strategy. The project works to investigate and document employment status, identify barriers to employment and techniques and reasonable accommodations to overcome these barriers, identify training needs in the Business Enterprise Program, and develop and deliver training programs. Training and dissemination activities include an information and referral center, national conferences, inservice training and technical assistance, advanced training for practitioners, advanced training in research, and publication and distribution of a variety of materials in accessible media.

Rehabilitation Research and Training Center on Rural Rehabilitation Services

University of Montana
52 Corbin Hall
Missoula, MT 59812
muarid@selway.umt.edu
http://ruralinstitute.umt.edu

Principal Investigator: Tom Seekins, PhD
Public Contact: 888/268-2743 (V/TTY, information service only); 406/243-5467 (V/TTY); Rural Disability Information Network [RUDI] BBS numbers: 406/243-2318; 800/961-9610 (In MT and WY); Fax: 406/243-2349

Project Number: H133B70017
Start Date: September 1, 1992
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 97 $500,000; FY 98 $550,000
Abstract: This RRTC has the following objectives for improving rural rehabilitation services: (1) identify the employment and vocational rehabilitation service needs of people with disabilities in rural areas; (2) develop interventions to improve employment outcomes; (3) demonstrate rural entrepreneurial models; (4) identify issues in rural independent living and develop interventions to improve transportation, health care, housing, and accessibility; (5) coordinate with rural independent living centers to identify or design and test alternative models of delivery of rural rehabilitation services; (6) provide training in rural rehabilitation research and practice; (7) conduct an annual interactive conference on disability issues in rural America; and (8) disseminate research findings to rehabilitation service-delivery personnel.

Rehabilitation Research and Training Center on Employment and Disability Policy

Cornell University
Program on Employment and Disability
School of Industrial and Labor Relations
106 ILR Extension Building
Ithaca, NY 14853-3901
smb23@cornell.edu
http://www.ilr.cornell.edu/ped

Principal Investigator: Susanne Bruyère, PhD; Richard Burkhauser, PhD; David Stapleton, PhD
Public Contact: Susanne Bruyère, PhD, 607/255-7727 (V); 607/255-2891 (TTY); Fax: 607/255-2763

Project Number: H133B980038
Start Date: November 16, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $700,000
Abstract: Using principles of economics, this project conducts policy research on how environmental factors influence the work outcomes of people with disabilities. Researchers also address critical aspects of their employment outcomes, recognizing the heterogeneity of people with disabilities, and explain the importance of interactions among the multiplicity of programs intended to meet the employment needs of people with disabilities. Research includes: (1) a comprehensive analysis, using existing panel data, of the current employment status of people with disabilities; (2) a longitudinal analysis of the effects of labor market change on the employment and earnings of people with disabilities; (3) a longitudinal analysis of return-to-work after the onset of a disability; and (4) a longitudinal analysis of the impact of civil rights protections on the employment and earnings of people with disabilities.

Rehabilitation Research and Training Center on Drugs and Disability

Wright State University
School of Medicine
Substance Abuse Resources and Disability Issues
P.O. Box 927
Dayton, OH 45401-0927
dcmoore@desire.wright.edu
http://www.med.wright.edu/SOM/SARDI

Principal Investigator: Dennis C. Moore, EdD
Public Contact: Jo Ann Ford. 937/259-1384 (V/TTY); Fax: 937/259-1395

Project Number: H133B70018
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 97 $499,369; FY 98 $602,294

Abstract: This project conducts epidemiological and evaluative studies of substance abuse and substance abuse services for consumers of state vocational rehabilitation (VR) programs. Activities address substance abuse as it co-exists with other disabilities; all components of the RRTC are designed to interrelate and synergistically build on each other. The research components include longitudinal and multisite studies to address more advanced research questions, and quantitative/qualitative methods or secondary analysis to investigate vocational rehabilitation issues for people with HIV and the relationship of social benefits on VR outcomes. The training components use a variety of materials, venues, and trainers in order to address needs within pre- and inservice populations. Training and dissemination components also include extensive use of distance learning media, especially use of the Internet to provide professionals and consumers with timely and relevant information. Stakeholder concerns and interests are addressed by several mechanisms, including a formal subcontract with the National Association on Alcohol, Drugs, and Disability. Multiple collaborations are delineated with federal agencies, including the Substance Abuse and Mental Health Services Administration, as well as professional and consumer organizations, national clearinghouses, other RRTCs, and institutions of higher education.

The MRI/Penn Training Center on Vocational Rehabilitation Services for Persons with Long-Term Mental Illness

Matrix Research Institute
6008 Wayne Avenue
Philadelphia, PA 19144
workmri@aol.com
http://www.matrixresearch.org

Principal Investigator: Donald J. Dellario, PhD; Irvin D. Rutman, PhD; Trevor Hadley, PhD
Public Contact: Donald J. Dellario, PhD, 215/438-8200 (V); 215/438-1506 (TTY); Fax: 215/438-8337

Project Number: H133B70007
Start Date: June 5, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $500,000; FY 98 $500,000
Abstract: This RRTC focuses on four research areas: (1) improving the work incentives of the Social Security system, (2) linking client characteristics and program design to client outcomes, (3) exploring employer/employee relationships, and (4) examining vocational rehabilitation's relationship to behavioral managed care systems. It also focuses on four training issues: (1) improving rehabilitation research skills; (2) developing mental health/vocational rehabilitation curricula for human services, social work, and nursing; (3) assessing training methodologies in the field; and (4) expanding online dissemination to the field.

Rehabilitation Research and Training Center on Improving Supported Employment Outcomes for Individuals with Developmental and Other Severe Disabilities

Virginia Commonwealth University
School of Education
1314 West Main Street, Box 842011
Richmond, VA 23284-2011
tcblanke@vcu.org
http://www.vcu.edu/rrtcweb

Principal Investigator: Paul Wehman, PhD, 804/828-6772 (V)
Public Contact: Michael Barcus, Director of Training, 804/828-1851 (V); 804/828-2494 (TTY); Fax: 804/828-2193

Project Number: H133B30071
Start Date: October 1, 1993
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 93 $648,610; FY 94 $723,674; FY 95 $723,674; FY 96 $723,646; FY 97 $723,674; FY 98 $71,174
Other funding: FY 94 $73,508
Abstract: This RRTC serves as a national clearinghouse of information on supported employment; generates six major lines of research in areas of policy, local implementation, consumer implementation, program evaluation, vocational integration, and school-to-work transition; and provides a broad-based spectrum of training activities and products related to supported employment.

Rehabilitation Research and Training Center on Workplace Supports

Virginia Commonwealth University
Rehabilitation Research and Training Center on Workplace Supports
1314 West Main Street, Box 842011
Richmond, VA 23284-2011
tcblanke@vcu.org
http://www.vcu.edu/rrtcweb

Principal Investigator: Paul Wehman, PhD
Public Contact: Valerie Brooke, Associate Director, 804/828-1851 (V); 804/828-2494 (TTY); Fax: 804/828-2193

Project Number: H133B980036
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $699,992
Abstract: This Center helps to increase the national employment rate among people with disabilities by identifying factors in the work environment that inhibit or enhance employment outcomes and by sharing the results with the business community. Researchers: (1) analyze existing or new financial incentives to find those that encourage enterprises to hire or retrain workers with disabilities; (2) measure the effectiveness of disability management and return-to-work strategies; (3) assess employers' need for information, training, and resources; (4) conduct, in business settings, interventions that respond to employer needs; (5) analyze the interventions to determine their effectiveness; (6) determine the impact of changes in work structures such as telecommuting and self-employment on the employment outcomes of people with disabilities. Stakeholders who benefit from these research, training, technical assistance, and dissemination efforts include business personnel; rehabilitation service personnel; federal and state policy makers; people with disabilities; their guardians, advocates, and authorized representatives; students; and the general public.

Rehabilitation Research and Training Center on Community Rehabilitation Programs to Improve Employment Outcomes

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Principal Investigator: Daniel C. McAlees, PhD
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Project Number: H133B980040
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $700,000
Abstract: This project engages community-based rehabilitation programs (CRPs) and state rehabilitation programs in an effort to open multiple funding sources for rehabilitation and habilitation services and employment opportunities for people with disabilities. The project includes a series of interrelated studies directed toward changing outcomes and determining CRP capacities to affect economic status of people with disabilities in their communities and develops a complementary methodology for achieving utilization and application of the new knowledge. Primary research tasks: (1) examining how CRPs are serving people with disabilities from alternate sources of funding; (2) determining the extent to which consumers pursue and receive services, compared to the intentions of the Rehabilitation Act; (3) exploring what funding, service, and strategy capacities exist to address those intentions more coherently at the community-level; (4) devising and demonstrating practice-program alternatives that materially improve outcomes from CRPs; and (5) clarifying how CRPs as an industry can be better enjoined as a complementary resource to improve the economic and community integration status of people with disabilities. The project establishes a publicly accessible national database of core information on CRP programs, and includes training, technical assistance, and dissemination activities.

A Four-Year Research and Demonstration Project to Address Ways to Improve the Employment Practices Covered by Title I of the Americans with Disabilities Act (ADA)

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Principal Investigator: Susanne Bruyère, 607/255-7727 (V)
Public Contact: Deborah Fisher, 607/255-9536 (V); 607/255-2891 (TTY); Fax: 607/255-2763

Project Number: H133A70005
Start Date: October 1, 1997
Length: 48 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 97 $249,958; FY 98 $249,804

Abstract: This project investigates how Title I of the ADA affects employment practices of private-sector small, medium, and large businesses, and ways to improve employment practices covered by the ADA. The research identifies employment practices that have challenged implementation of the ADA, and identifies interventions that can be used by private sector employers and people with disabilities to address these practices. The project examines employment policy and practices that enhance both the hiring and retention of workers with disabilities. The Program on Employment and Disability in the School of Industrial and Labor Relations at Cornell University, in collaboration with the Washington Business Group on Health (WBGH), the Lewin Group, and the Society for Human Resource Management, jointly administer the project.

Multimedia Job Accommodations Curriculum Project for Persons Who Are Deaf or Hard of Hearing

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Principal Investigator: Douglas Watson, PhD
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Project Number: H133G70104
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 97 $100,164; FY 98 $122,337
Abstract: This project meets the needs expressed by consumers, employers, and vocational rehabilitation professionals for increased knowledge about requesting and getting on-the-job accommodations. The project makes accessible and disseminates research-based findings and information already developed in a prototype model that empowers workers who are deaf or hard of hearing to identify and request an appropriate on-the-job accommodation.

Policy Barriers for People with Long Term Mental Illness Who Want to Work

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Washington, DC 20010-2949
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Principal Investigator: Bonnie O'Day
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Project Number: H133G80031
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $124,996

Abstract: This project uses the personal experiences of people with long-term mental illness (LTMI) to identify policies and implementation strategies within the public assistance system that either promote work or create to work for this population. The project has the following objectives: (1) to determine whether programs and policies constitute barriers to employment among working and non-working people with LTMI and how participants in this sample experience the identified barriers; (2) to determine whether and how a small sample of workers with LTMI use existing work incentives and other programs to maintain employment; (3) to determine what perceived policy and programmatic barriers to employment identified in Phase I are present in a larger sample of people with LTMI, and whether they systematically vary by socioeconomic status, gender, race, age, or other socio-demographic characteristics; (4) to provide an in-depth description of the impact of perceived policy and programmatic barriers and options on the employment histories of five workers and five non-workers with LTMI; and (5) to recommend policies and implementation strategies that promote work among the LTMI population, and to disseminate the information.

Development of an Individualized Marketing Strategy for Job Development for People with Severe Disabilities

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1660 L Street Northwest Suite 700
Washington, DC 20036
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Principal Investigator: Karen F. Flippo
Public Contact: Melinda Mast, 202/787-7639; Fax: 202/787-0966

Project Number: H133G80030
Start Date: June 15, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $123,878
Abstract: This project develops an Individualized Employment Portfolio and a training manual that helps people with severe and multiple disabilities, including physical and communication disabilities, to secure employment. The product increases their functional capability for individualized representation with potential employers, as well as by employment representatives as appropriate. The project surveys and field-tests the materials with employers, and then modifies and finalizes the product.

Development and Dissemination of a Questionnaire and Method to Evaluate Customer Satisfaction with Rehabilitation

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Principal Investigator: Adele Patrick
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Project Number: H133G80023
Start Date: October 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $125,000
Abstract: This project develops a short, uncomplicated consumer satisfaction survey instrument to be administered by rehabilitation programs. Maximizing satisfaction with rehabilitation services should allow more consumers to reach employment and other important goals, and should reduce the number of consumers who drop out. The project: (1) develops an instrument and methodology for the collection of data regarding consumer satisfaction with services provided by the state and federal rehabilitation agencies, and (2) disseminates information about the use of the instrument and analysis of the data provided by the instrument. When instrument development is completed, it is validated by soliciting input from focus groups. Then revisions are made and the instrument is pilot tested. The project produces a survey methodology designed to generate the highest possible response rate in order to assure that the rehabilitation agency is getting an accurate assessment of satisfaction. Ongoing information about the service delivery system should include data regarding satisfaction so that service delivery can be improved and priorities can be managed.

Experimental Test of Demand-Side Job Development in Iowa and Georgia

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Principal Investigator: Robert Stensrud
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Project Number: H133G60187
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 96 $124,691; FY 97 $124,691; FY 98 $125,000
Abstract: This project is testing an innovative job placement model: demand-side job development. Demand-side job development makes the workplace more "user friendly" for people with disabilities and assists employers in meeting their personnel needs by providing these services directly to employers. The model is being tested in Iowa and Georgia, which were selected for their ethnic diversity and labor market variations. The experimental placement model (demand-side placement) is tested in one district in each state. A control district in each state continues to use only traditional placement strategies.

Exploratory Study of the Relationship Between Sustained Employment and Psychosocial Adjustment of People with Psychiatric Disabilities

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Project Number: H133G80124
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $124,998
Abstract: This project studies the relationship between successful employment of people with psychiatric disabilities and their overall level of psychosocial adjustment. In this study the concept of psychosocial adjustment is related to the concept of recovery, described as a unique process of changing one's attitudes, values, feelings, goals, skills, and roles. In this way, recovery is conceptualized as the core of the process of psychosocial adjustment, since it involves the internal restructuring of the person and is expected to lead not only to the person's adaptation to the illness but also to a significant improvement and a qualitatively different functioning of the person. From this perspective, this study explores the relationship of sustained competitive employment to consumers' psychosocial functioning. The relationship of consumers' vocational and psychosocial functioning over time is explored as well.

The Impact of a Rehabilitation Introduction Group on State Vocational Rehabilitation Outcomes

Massachusetts Rehabilitation Commission
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Principal Investigator: Thomas P. McCarthy, ScD, CRC
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Project Number: H133G70098
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $83,366; FY 98 $76,069
Abstract: This study helps people with severe psychiatric disabilities make informed decisions about pursuing vocational rehabilitation and studies the specific cognitive factors that correlate with rehabilitation readiness. A total of 42 subjects participate in Rehabilitation Introduction Groups (RIGs) prior to entry into state vocational rehabilitation (SVR). An 18-month follow-up compares a representative RIG sample to SVR clients who did not participate in the RIGs in order to assess the impact of the RIG on SVR process, outcomes, and measures of readiness.

The Self-Employment Experience: Learning About Entrepreneurs with Disabilities to Build Models for Improving Self-Employment Outcomes

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Principal Investigator: Nancy Arnold, PhD; Tom Seekins, PhD, 406/243-2469
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Project Number: H133G70064
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 97 $120,822; FY 98 $124,990

Abstract: This project examines self-employment experiences of people with disabilities. While self-employment is a growing national trend for people without disabilities, it is generally considered a less-than-optimal outcome for consumers of vocational rehabilitation (VR) services and is seldom pursued. Survey respondents are sampled from two sources. First, state VR agencies with high percentages of self-employment closures are solicited to participate by providing access to consumers they have assisted in starting businesses. Second, the Disabled Businesspersons Association (DBA) is solicited to provide access to members who have achieved self-employment without the assistance of a VR agency. Project goals include: (1) providing a clearer understanding of self-employment for people with disabilities, (2) encouraging development of new policies and procedures, and (3) providing future entrepreneurs with disabilities and support agencies with recommendations for improved practice. Researchers also develop profiles of self-employed individuals with disabilities and recommend changes to VR practices that promote self-employment as a viable service outcome.

Vocational Rehabilitation Services for Persons Who Are HIV+ or Have AIDS: Enhancing Quality of Life and Labor Market Participation

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Research Foundation of CUNY
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Principal Investigator: John O'Neill, PhD
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Project Number: H133G60101
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000
Abstract: This project is measuring the impact of vocational rehabilitation services on the quality of life and labor market participation of people who have HIV/AIDS. Participatory action research (PAR) provides a methodological framework for the study. The research was initiated with a series of focus groups conducted with people who have HIV/AIDS, to identify the range of needs they experienced. These needs are being further validated through a Quality of Life survey of a minimum of 200 people with HIV/AIDS. In addition, surveys are collected from a minimum of 100 other people with spinal cord injury (SCI) and liver transplants. These other populations are fairly well known to rehabilitation professionals and provide useful contrasts in understanding the needs of people with HIV/AIDS, and in determining which services are likely to be the most effective given similar circumstances.

Functional Assessment in Rehabilitation Software Conversion (FAIR/SC)

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Laverock, PA 19038

Principal Investigator: Howard Dansky
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Project Number: H133G80099
Start Date: September 1, 1998
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $124,952
Abstract: This project develops, field tests, and produces an innovative computer-based software system to improve the effectiveness of employment programs for people with cognitive disabilities. This new software uses new vocational assessment technology developed and tested over a three-year period. The project's objectives: (1) to design a software version of the FAIR assessment model, including conceptual design of the program components and functional analysis of information-processing relationships among the model components; (2) to recruit service providers as partners and conduct user focus groups at field sites, and integrate results of testing several hardware and software configurations; (3) to perform parallel, interrelated activities and continual quality assurance to test for adherence to written specifications; (4) to design refinements and improvements during one year field tests of use by supported employment practitioners and service recipients; (5) to write user documentation; (6) to perform more field tests at various sites; (7) to evaluate effectiveness, review and assimilate user feedback; and (8) to refine, write final user guides and documentation, and publish the application.

Testing the Effectiveness of School-to-Work Transition Services for Youth with Serious Emotional Disturbances

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Principal Investigator: Laura Blankertz
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Project Number: H133G80084
Start Date: September 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $123,297
Abstract: This project improves school-to-work transition services by comparing an experimental and a comparison group on a variety of economic and non-economic outcomes. The project builds upon a pilot initiative, Project YES (Young Adult Employment), which was designed to develop a model for inter-system collaboration in the operation of a school-to-work transition program for youth with serious emotional disturbance. In this project, the Philadelphia Board of Education, the Philadelphia Office of Mental Health and its city-wide network of provider agencies, and the Philadelphia Office of the State Vocational Rehabilitation system, provide interventions through each of three clearly delineated stages: (1) identification and engagement of youth leaving school, (2) implementation of services, and (3) development of individual supports to maintain youth in post-transition activities. The seven economic and non-economic factors compared include: use of mental health and vocational rehabilitation services, types of employment, length of employment, wages earned, self-esteem, empowerment and community involvement, and criminal activity.

Impact of the Home- and Community-Based Waiver on Employment Outcomes of Individuals with Disabilities

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Project Number: H133G50110
Start Date: September 1, 1995
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 95 $117,316; FY 96 $117,316; FY 97 $117,316; FY 98 (No-cost extension through 12/31/98)

Abstract: The Medicaid Home- and Community-Based (HCB) Waiver program has had a profound impact on residential placement patterns. However, the HCB Waiver program has had far less impact on improving employment opportunities, particularly supported competitive employment, for people with severe disabilities. The purpose of this project is to determine the national status of state use of HCB Waivers to fund supported employment, identify artificial barriers and obstacles to funding supported employment through HCB Waivers to eligible Medicaid beneficiaries, and identify successful policy and implementation strategies that states have employed to access this funding source for supported employment expansion. The findings and recommendations generated from this study provide useful information for state systems, provider agencies, and consumers to use the HCB Waiver program to expand supported employment service access, reduce waiting lists for services, and promote quality services for Medicaid beneficiaries.

Enhancing Consumer-Counselor Working Relationships in Rehabilitation: An Empirical Research Investigation of Counselor Expectancies and Working Alliance as Variables for Optimizing Consumer-Counselor Relationships, Consumer Satisfaction, and Rehabilitation Outcomes

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Project Number: H133G80135
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $124,444

Abstract: This project brings the concept of "consumer involvement" to a place beyond the level of good intentions, rhetoric, platitude, and legal mandate; it provides practical tools with which relevant constructs can be measured and changed to build meaningful partnerships. Maximizing the involvement of consumers in the vocational rehabilitation (VR) process in a meaningful manner can be accomplished if the working alliance between counselor and consumer is strengthened in a direct and measurable way. The target audience includes clients with severe disabilities of the state-federal VR program and the counselors who are employed to provide them with services.

Health and Function

NIDRR's research focus for health and function addresses challenges to individual care, services, and supports for people with disabilities. Research topics include: medical rehabilitation; health and wellness programs; service delivery; short and long-term interventions; systems research; and new and emerging disabilities.

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Rehabilitation Research and Training Center on Secondary Conditions of Spinal Cord Injury: Promoting General Health, Well-Being, and Community Integration Through Home-Based, Self-Directed Care

University of Alabama/Birmingham
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Principal Investigator: Amie B. Jackson, MD, 205/934-3334 (V); 205/934-3330 (V); 205/934-4642 (TTY)
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Project Number: H133B980016
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $799,993

Abstract: This RRTC conducts coordinated, integrated, and advanced research in the prevention and treatment of secondary conditions of Spinal Cord Injury (SCI). The eight interrelated projects include: (1) determine the effectiveness of cranberry pills to prevent and treat urinary tract infections (UTIs); (2) evaluate interventions used to prevent and treat UTIs in people with SCI using the University of Alabama/Birmingham SCI Urologic Database; (3) study the relationship of beverage consumption and water hardness to the risk of urinary tract stones; (4) address pain following SCI by evaluating SCI pain classification systems, studying the effectiveness of gabapentine and methadone in relieving certain types of pain, and developing a method to target those at risk; (5) determine the duration of immune response to pneumococcal vaccine and the need for revaccination; (6) evaluate a screening tool to identify people with SCI at high risk for sleep apnea, and evaluate treatments to improve their health and quality of life; (7) study the use of telemedicine to reduce depression and secondary conditions among people with SCI and their caregivers through problem solving interventions; and (8) evaluate and adapt a nationally recognized weight-loss project for a population of people with SCI. A collaborative project with another Center evaluates a computer-based risk assessment and feedback tool for assessing secondary conditions. This RRTC provides training on research methodology and information based on research activities to people with disabilities, their families, service providers, and rehabilitation professionals. Information is disseminated through print media (information sheets and newsletters), electronically (through the Internet and a fax information service), and through technical assistance.

Rehabilitation Research and Training Center in Neuromuscular Diseases

University of California/Davis
MED: Physical Medicine and Rehabilitation
TB 191
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http://disability.ucdavis.edu

Principal Investigator: Craig McDonald, MD
Public Contact: Katheryn Devereaux, PhD, Training and Information Services Director, 530/752-2903 (V); 530/752-3468 (TTY); Fax: 530/752-3468

Project Number: H133B980008
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $650,000
Abstract: This project enhances the quality of life for people with neuromuscular diseases through multidisciplinary research and a comprehensive program of training and information services. The Center serves consumers, physicians, and health care workers. Program areas include: Interventions to preserve functional capacity including management of weakness and respiratory insufficiency due to muscle wasting, exercise interventions, treatment of exercise related fatigue, pain interventions, lower limb orthotic interventions, and dietary interventions; interventions to enhance community integration, including incorporating goal-based approaches to community integration, facilitation of healthy adaptation through development of stress management and coping skills, and resource training for acquisition of disability-related information through the Internet; genetic testing, information, and research; and training and information services. The centerpiece of the information services program is the National Clearinghouse of Information on Neuromuscular Diseases, which provides access to findings on basic and applied research.

Aging with Spinal Cord Injury (SCI)

Los Amigos Research and Education Institute, Inc. (LAREI)
800 West Annex
7601 East Imperial Highway
Downey, CA 90242
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Principal Investigator: Bryan J. Kemp, PhD; Robert Waters, MD
Public Contact: Lilli Thompson, PT, 562/401-7402; Fax: 562/401-7011

Project Number: H133B70011
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $650,000; FY 98 $650,000
Abstract: The Rehabilitation Research and Training Center (RRTC) on Aging with Spinal Cord Injury (SCI) is devoted to understanding the unique problems people with spinal cord injury experience as they age. Topics of research include: the course of aging with SCI, cardiovascular and pulmonary aspects of aging with SCI, bone loss across ethnic groups, activities of daily living, employment, depression, and formal and informal care systems for people aging with SCI. The RRTC has several goals for education, training, dissemination, and utilization: to train current and future health, allied health, and rehabilitation professionals about aging with SCI; to train and develop rehabilitation research professionals in the area of aging with SCI; to improve adoption and use of RRTC-developed knowledge and treatment regimens by health and rehabilitation professionals; to disseminate information about aging with SCI to people with SCI and their families; and to train graduate students and medical students in advanced knowledge and techniques from studies about aging with SCI. Training and dissemination occurs through advanced and continuing education courses, local and national conferences, workshops, and the Internet.

Rehabilitation Research and Training Center on Aging with a Disability

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Project Number: H133B980024
Start Date: September 1, 1998
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $700,000
Abstract: This project helps people who are aging with a disability by conducting a series of studies, using a sample of 1,000 people, with a variety of disabilities represented. Studies include: (1) the natural course of aging with a disability, which investigates physical, function, and psychosocial aging with a disability over time; (2) a cross-ethnic-group study focusing on assisting family caregivers of people aging with a disability, and comparing stress, support, coping preferences, and appraisals of caregiving for people aging with a disability and evaluating the effectiveness of a structured group intervention; (3) improving community integration and adjustment, focusing on depression and how it affects community integration and demonstrates effective treatment; (4) secondary complications such as diabetes and thyroid disorders, determining if providing feedback to patients' primary physicians regarding these illnesses results in appropriate treatment, and if functional impairment is related to these illnesses; (5) bone mass, focusing on whether a regimen of exercise and vitamins improves bone density; and (6) the effectiveness of assistive technology (AT) and environmental interventions (EI) in maintaining functional independence, evaluating differences between those receiving intensive AT and EI services and those receiving standard care. Training, dissemination, and technical assistance activities focus on students and professionals in the health care fields, researchers, community service providers, and people with disabilities and their families.

Managed Health Care for Individuals with Disabilities

Medlantic Research Institute
National Rehabilitation Hospital Research Center
102 Irving Street Northwest
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Principal Investigator: Gerben DeJong, PhD
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Project Number: H133B70003
Start Date: May 1, 1997
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $499,969; FY 98 $499,988
Abstract: This project provides national leadership on the major health service and health policy issues facing consumers with disabilities in managed health care arrangements. It: (1) conducts research; (2) prepares special policy analyses; (3) hosts forums for discussion; (4) presents expert testimony to Congress and governmental agencies; (5) publishes in the health policy, consumer, and trade literature; (6) trains graduate students with disabilities in health service research; and (7) disseminates findings to diverse consumer, provider, payer, academic, and policy-making audiences. On the state and national levels the project seeks to make managed care and the larger health care system more responsive to the needs of people with disabilities by acting as a catalyst for the development of new ideas. Program partners are the National Rehabilitation Hospital Research Center (NRH-RC) in Washington DC and the Independent Living Research Utilization (ILRU) center in Houston Texas.

National Research and Training Center on Psychiatric Disability

University of Illinois/Chicago
104 South Michigan Avenue, Suite 900
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Principal Investigator: Judith A. Cook, PhD, 312/422-8180, ext. 19 (V)
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Project Number: H133B50004
Start Date: September 30, 1995
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 95 $400,000; FY 96 $400,000; FY 97 $400,000; FY 98 $400,000
Other funding: FY 95 $145,000 (Source: Center for Mental Health Services); FY 97 $145,000 (CMHS)
Abstract: The Center conducts basic evaluation and research, and trains rehabilitation, education, and mental health service providers, consumers, and families, in seven major areas: peer support, vocational rehabilitation, transition-age youth with mental illness, consumer service delivery, familial experiences, minority issues, and women's issues. The staff also provides information for public policy initiatives.

Rehabilitation Research and Training Center on Aging with Mental Retardation

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College of Associated Health Professions
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Project Number: H133B980046
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $699,934
Abstract: This project promotes the independence, productivity, community inclusion, full citizenship, and self-determination of older adults with mental retardation through a coordinated program of research, training, technical assistance, and dissemination activities. The research program is aimed at increasing knowledge about the changing needs of older adults with mental retardation and their families as they age and the effectiveness of innovative approaches, public policies, and program interventions that provide needed supports and that promote the successful aging of these adults and their families. It examines how age-related changes in physical and psychological health affect the ability to function in the community, including home, work, and leisure settings. The research program also identifies best practices and current public policies that seek to support these adults and their families. The primary goal is to translate the knowledge gained into practice through board-based training, technical assistance, and dissemination to people with mental retardation, their families, service providers, administrators and policy makers, advocacy groups, and the general community. Dissemination vehicles include the Center's Clearinghouse, Web page, and newsletters.

Rehabilitation Research and Training Center on Stroke Rehabilitation

Rehabilitation Institute Research Corporation
345 East Superior Street
Chicago, IL 60611

Principal Investigator: Elliot J. Roth, MD, 312/908-4637
Public Contact: Linda Lovell, Project Coordinator, 312/908-6197; Fax: 312/908-6998

Project Number: H133B980021
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $800,000

Abstract: This project tests the effectiveness of several stroke rehabilitation strategies and tactics, trains stroke survivors and professionals, and disseminates knowledge relevant to stroke care. In order to extend the knowledge base of stroke rehabilitation, produce changes in clinical practice, and enhance the quality of life of stroke survivors and their families, the Center: (1) identifies, develops, and evaluates rehabilitation techniques in order to address coexisting and secondary conditions and improve outcomes for all stroke patients; (2) develops and evaluates standard aerobic exercise protocols; (3) identifies and evaluates methods to identify and treat depression and other psychological problems associated with stroke; (4) determines the effectiveness of stroke prevention education provided in a medical rehabilitation setting; (5) evaluates the impact of changes in diagnosis and medical treatment of stroke on rehabilitation needs; (6) evaluates long-range outcomes for stroke rehabilitation across different treatment settings; (7) evaluates the impact of stroke practice guidelines on delivery and outcomes of rehabilitation services; (8) provides training on new approaches, innovations, and the specialized principles and practices of rehabilitation care of individuals with stoke; (9) provides applied research experience and training in research principles and methods; (10) disseminates information of new developments in the area of stroke care and research to people with stroke and their families, rehabilitation professionals, and service providers; and (11) conducts a state-of-the-science conference. The Center has a large database of information regarding stroke rehabilitation patients and continues ongoing systems and activities to collect and analyze data concerning stroke impairment, disability, and social functioning.

Rehabilitation Research and Training Center on Rehabilitation and Childhood Trauma

New England Medical Center
Department of Physical Medicine and Rehabilitation
750 Washington Street, 75K-R
Boston, MA 02111
http://www.nemc.org/rehab/homepg.htm

Principal Investigator: Carla DiScala, PhD, 617/636-5037 (V)
Public Contact: Vincent Licenziato, Staff Assistant, 617/636-5036 (V/TTY); Fax: 617/636-5513

Project Number: H133B50006
Start Date: August 1, 1993
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 93 $499,631; FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $250,000

Abstract: This RRTC focuses on pediatric trauma in the areas of research, education, and training of professionals and consumers. Activities are divided into three areas: (1) maintenance of the National Pediatric Trauma Registry (NPTR), (2) dissemination of the NPTR results to professionals and consumers, and (3) training. Dissemination of the NPTR focuses on injuries to children with special care needs, severe injuries such as those resulting in spinal cord damage and those caused by child abuse, trends in sports-related injuries, trends in access to rehabilitation services, the relationship between medical insurance and medical care received, and the effectiveness of cardiopulmonary resuscitation in extremely severe injuries. Training activities include presenting the NPTR data in workshops for health care professionals who serve children, creating new fact sheets, publishing the *REHAB Update* newsletter, continuing outreach and dissemination via the RRTC Web site, creating new tip cards (children injured through peer violence and bullying at school that involves children with disabilities), and making subsets of the NPTR data available to train graduate students in injury control at the Johns Hopkins Center for Injury Research and Policy and the Harvard Injury Control Research Center.

Rehabilitation Research and Training Center in Rehabilitation for Persons with Long-Term Mental Illness

Boston University
Sargent College of Health and Rehabilitation Sciences
Center for Psychiatric Rehabilitation
940 Commonwealth Avenue West
Boston, MA 02215
kfurlong@bu.edu
http://web.bu.edu/SARPSYCH

Principal Investigator: William Anthony, PhD
Public Contact: 617/353-3549 (V); 617/353-7701 (TTY); Fax: 617/353-7700

Project Number: H133B40024
Start Date: August 1, 1994
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 94 $350,000; FY 95 $350,000; FY 96 $350,000; FY 97 $350,000; FY 98 $350,000
Other funding: FY 94 $300,000 (Source: Center for Mental Health Services); FY 95 $300,000 (Source: CMHS); FY 98 $300,000 (Source: CMHS)
Abstract: This RRTC helps people with psychiatric disabilities achieve their goals of recovery through the development, demonstration, dissemination, and utilization of new psychiatric rehabilitation knowledge and technology. Project goals include: (1) evaluating the effect of a combined supported education and supported employment model on consumer outcomes; (2) developing, implementing, and evaluating a model of personal assistance for people diagnosed with severe mental illness; (3) assisting managers and professionals with psychiatric disabilities in choosing, getting, and keeping white collar careers; (4) conducting secondary and meta-analyses of the vocational and rehabilitation outcomes of people with severe mental illness; (5) evaluating the impact of three demonstrations to train consumers and other constituents in overcoming the financial disincentives to employment; (6) identifying the indicators of recovery from mental illness using consumers who have experienced the rehabilitation process; (7) documenting and describing effective strategies to overcome stigma and discrimination in the workplace and in training settings; and (8) identifying the indicators of recovery from mental illness using consumers who have experienced the rehabilitation process. Results from this research are immediately disseminated to and used by practitioners, consumers, educators, administrators, and other researchers.

Rehabilitation Research and Training Center for Infants, Children, and Youth

University of Minnesota
Center for Children with Chronic Illness and Disability
Institute for Health and Disability
Division of General Pediatrics and Adolescent Health Medical School
Box 721
421 Delaware Street Southeast
Minneapolis, MN 55455
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http://www.peds.umn.edu/Centers

Principal Investigator: Robert W. Blum, MD, PhD
Public Contact: 612/626-4032 (V); 612/624-3939 (TTY); Fax: 612/626-2134

Project Number: H133B40019
Start Date: September 15, 1994
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 94 $600,000; FY 95 $600,000; FY 96 $600,000; FY 97 $600,000; FY 98 $600,000

Abstract: This RRTC focuses on the psychosocial-developmental aspects of disability and chronic illness, service-delivery issues, and policy issues. The Center investigates integrated service-delivery systems for children in managed care, social development and resilience, developmental interventions, minority family concerns, financing issues in schools, and transition health care for adolescents. The Center conducts research, training, and dissemination activities in collaboration with the University of Washington, the University of California/San Francisco, McManus Health Policy Inc., the PACER Center, the Division of General Pediatrics, Developmental Evaluation Center, and Project School Care of Children's Hospital Boston.

Missouri Arthritis Rehabilitation Research and Training Center (MARRTC)

University of Missouri/Columbia
Arthritis Grants Office
DC330.00
One Hospital Drive
Columbia, MO 65212
bakerv@health.missouri.edu
http://www.hsc.missouri.edu/arthritis
http://www.hsc.missouri.edu/fibro

Principal Investigator: Jerry C. Parker, PhD, 573/814-6480
Public Contact: Valerie Baker, 573/884-1499; Fax: 573/884-5689

Project Number: H133B980022
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $800,000
Abstract: MARRTC helps to prevent and manage disability in people with arthritis and related musculoskeletal disease by providing leadership at the national level, through three strategies: (1) MARRTC conducts state-of-the-art rehabilitation and health services research that addresses the needs of people with arthritis and related musculoskeletal diseases in the following areas: exercise and fitness, interventions for psychological well-being and pain, job accommodations and employment, and health and wellness, using participatory action research (PAR) strategies to emphasize the inclusion of consumers in all phases of the research process; (2) MARRTC provides training for physicians and other health care professionals in the rehabilitative aspects of rheumatologic practice, including university-based programs, national presentations, research capacity-building, and publications aimed at improving clinical skills; (3) MARRTC disseminates rehabilitation research and technology transfer for the empowerment of people with arthritis to help them to minimize disability, maintain employment, and improve functional status.

Rehabilitation Research and Training Center on Rehabilitation Interventions in Traumatic Brain Injury

The Institute for Rehabilitation and Research (TIRR)
1333 Moursund Avenue
Houston, TX 77030
whigh@bcm.tmc.edu

Principal Investigator: L. Don Lehmkuhl, PhD, 713/666-9550, ext. 230
Public Contact: Walter M. High, PhD, 713/666-9550, ext. 266; Fax: 713/668-5210

Project Number: H133B40002
Start Date: February 1, 1994
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 94 $650,000; FY 95 $650,000; FY 96 $650,000; FY 97 $650,000; FY 98 $650,000

Abstract: The mission of this RRTC is to conduct a program of research and training that improves rehabilitation interventions in traumatic brain injury (TBI). Activities include: (1) conducting a controlled clinical study of the effects of rehabilitation on people with TBI; (2) identifying individual characteristics and environmental barriers that contribute to the exacerbation of secondary complications, particularly by individuals with TBI who are from minority backgrounds, and developing interventions to address them; (3) conducting studies to determine the reliability and validity of selected outcome measures; (4) developing and testing prognostic indicators of rehabilitation outcome, including early predictors of functional outcomes for all age groups; and (5) developing and evaluating new methods of prevention and treatment of the secondary medical, psychological, and neurobehavioral complications of TBI.

Multiple Sclerosis Research and Training Center

University of Washington
Department of Rehabilitation Medicine
Box 356490
Seattle, WA 98195-6490
ghkraft@u.washington.edu
http://weber.u.washington.edu/~rehab

Principal Investigator: George H. Kraft, MD, MS
Public Contact: 206/543-7272; Fax: 206/685-3244

Project Number: H133B980017
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $691,314

Abstract: This Center promotes health and wellness of people with Multiple Sclerosis (MS) and improves their functioning and employment status. Fundamental to the project is a health survey administered to people with MS throughout the Northwest region. Information from the survey is fed into six project components: (1) promoting wellness among people with MS through brief counseling methods; (2) improving the functioning of people with MS through three studies: improving psychological distress using pharmacological intervention, evaluating the combined effect of cooling and exercise on performance, and improving function through cognitive rehabilitation interventions; (3) exploring the employment status of people with MS; (4) designing practical interventions and workplace modifications; (5) studying the interaction between aging and MS; and (6) exploring the effects of gender, culture, socio-economic status, ethnicity, place of residence, and insurance coverage on people with MS, in regard to symptomology and response to treatments. Researchers develop and apply interventions and conduct follow-up surveys to evaluate the effectiveness of the intervention strategies. This Center collaborates with the RRTC on Substance Abuse, the Consortium of MS Centers, the National MS Society, and the MS Association of America.

Exercise and Recreation for Individuals with a Disability: Assessment and Intervention

Rehabilitation Institute of Chicago
Center for Health and Fitness
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Chicago, IL 60611
ricsport@megsinet.net

Principal Investigator: Jeffery Jones
Public Contact: Cory Nagel, 312/908-4292; Fax: 312/908-1051

Project Number: H133A60032
Start Date: November 1, 1996
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 96 $175,000; FY 97 $175,000; FY 98 $175,000
Abstract: This project demonstrates that participation in exercise and physical activities improves function, facilitates community reintegration, and enhances the quality of life of people with disabilities. The project: (1) investigates the long-term effects of an exercise fitness program on the physiology, metabolic performance, and quality of life of people with spinal cord injury, stroke, and cerebral palsy; (2) examines the role of self-efficacy in maintaining participation in an exercise fitness program; (3) describes the types and frequency of recreation and fitness activities among people who have had a stroke, people with spinal cord injury, and people with cerebral palsy; (4) examines the relationships between participation in recreation and exercise programs and the health status, life satisfaction, and depression in the above populations; and (5) delineates barriers and deterrents to participation in recreation and exercise programs that exist for a variety of disability groups.

Research and Demonstration of a Model for Successfully Accommodating Adults with Disabilities in Adult Education Programs

University of Kansas Institute for Adult Studies and
Kansas State University Department of Special Education
3061 Dole Center
Lawrence, KS 66045
dmellard@ukans.edu
http://www.ku-crl.org/htmlfiles/core.html

Principal Investigator: Daryl Mellard, PhD; Warren White, PhD
Public Contact: 913/864-4780; Fax: 913/864-5728

Project Number: H133A50008
Start Date: September 1, 1995
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 95 $175,000; FY 96 $175,000; FY 97 $175,000; FY 98 (No-cost extension through 8/31/99)

Abstract: This project provides adult educators and adults with disabilities with validated accommodations useful in instruction and assessment. These accommodations help the individuals meet their educational needs and successfully function in employment and community settings. The project makes available information about legal rights and responsibilities, including handbooks for both adults with disabilities and adult service providers, a *Compendium of Materials and Resources*, and a *Procedural Guide*. The project compiles materials through: (1) a national survey of adult education programs, (2) a state survey of enrollees with disabilities in adult education, and (3) a case study of one local program in an urban center with high unemployment and multicultural diversity. Information gained from two symposia with adult educators and subject matter experts aids this process. Proceedings and videotapes of the symposia are available. The project develops an accommodations model that matches the functional needs of adults with disabilities to the demands of adult education programs, and tests the accommodations model and related products using a national sample of adult educators.

Collaborative Study of Impaired Self-Awareness After Traumatic Brain Injury

Mississippi Methodist Rehabilitation Center
Brain Injury Program
1350 East Woodrow Wilson
Jackson, MS 39216
marks@mmrcrehab.org
http://www.mmrcrehab.org

Principal Investigator: Mark Sherer, PhD
Public Contact: 601/364-3490; Fax: 601/364-3305

Project Number: H133A980067
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $140,108

Abstract: This project creates new knowledge on impaired self-awareness (ISA) in people with moderate to severe traumatic brain injury (TBI). ISA interferes with effective delivery of rehabilitation services, prevents self-advocacy, leads to distress within the family system, and negatively affects social outcomes. No effective treatment exists. This project studies its impacts and its subjective meaning for consumers in order to design new treatments and service delivery innovations. It conducts the first large-scale (N=160), prospective longitudinal study of ISA's neural substrates, neuropsychological features, natural history, and relationship to functional and quality-of-life outcomes over the first year following moderate to severe TBI. With several methodological innovations that improve interpretation of the quantitative data, project researchers provide the first systematic qualitative study of self-awareness from the perspective of the people with TBI and their families. The project uses: (1) the expertise of researchers involved in TBI outcomes research; (2) many data elements already captured in the Model System database and supported by Model System infrastructure; and (3) the high volume of subjects and excellence of resources jointly available at the two collaborating sites. The project is a collaboration between the TBI Model System of Mississippi and the TBI Model System at MossRehab in Philadelphia. Findings are disseminated to consumers, rehabilitation professionals, and the TBI Model Systems nationwide.

A Double-Blind, Placebo-Controlled Trial Exploring the Efficacy of Nortriptyline and Amantadine in the Management of Post-Traumatic Agitation

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Principal Investigator: W. Jerry Mysiw, MD
Public Contact: 614/293-3801; Fax: 614/293-3809

Project Number: H133A980056
Start Date: November 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $269,000

Abstract: This study provides objective data for evidence-based evaluation and treatment of the most common behavioral impediment to acute rehabilitation, post-traumatic agitation. Post-traumatic agitation is a dramatic behavioral consequence of traumatic brain injury (TBI) occurring in approximately 33 percent of coma-emerging patients. The agitated brain injury survivor has diminished capacity to tolerate or respond to traditional rehabilitation services. At risk for injury and disruptive to the therapeutic milieu, these patients consume considerable health care resources. Pharmacologic intervention is becoming increasingly important in the care of post-traumatic agitation in an effort to resolve the aberrant behavior promptly and permit the patient to respond to an expanded range of rehabilitation services. This project offers a unique opportunity to develop the multicenter trial needed to recruit a statistically meaningful cohort for study. The project involves a randomized, double-blind, placebo-controlled study of two medications commonly used to treat agitation. The study has specifically chosen measures of treatment efficacy with demonstrated validity in this population. The study is done in collaboration with four Model System Centers: Institute for Rehabilitation and Research (TIRR), MossRehab, Santa Clara Valley Medical Center, and the Rehabilitation Institute of Michigan (RIM).

Reducing Risk Factors for Abuse Among Low-Income Minority Women with Disabilities

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Department of Physical Medicine and Rehabilitation
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Principal Investigator: Margaret A. Nosek, PhD
Public Contact: Carol Howland, 713/960-0505; Fax: 713/961-3555

Project Number: H133A60045
Start Date: September 30, 1996
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 96 $250,000; FY 97 $250,000; FY 98 $250,000
Abstract: This project pursues strategies to reach women with disabilities at all stages of resolving abusive situations. To accomplish this purpose, the project has the following objectives: (1) identify risk factors for emotional, physical, and sexual abuse faced by women with disabilities; (2) assess the ability of rehabilitation and independent living counselors to identify women in abusive situations and refer them to appropriate community resources; (3) develop and test models for programs that reduce the risk of abuse for women with disabilities, particularly among women with disabilities from low-income, minority backgrounds where the incidence of abuse is highest; and (4) establish an agenda for future research on women with disabilities using a national advisory panel. The project works not only with programs that help battered women, but also with those in contact with women with disabilities in various community contexts.

Research Impact of Family Environment on Patient and Family Outcome After TBI: A Multi-Center Study

Baylor College of Medicine
Brain Injury Research Center
4007 Bellaire Boulevard, Suite EE
Houston, TX 77025
asander@bcm.tmc.edu

Principal Investigator: Angelle M. Sander, PhD
Public Contact: 713/666-9550; Fax: 713/668-5210

Project Number: H133A980058
Start Date: November 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $224,989

Abstract: This study determines the importance of the preinjury family environment in the prediction of long-term patient and family outcome after traumatic brain injury (TBI). The research develops models that can be used to identify family members and patients who are at risk for developing long-term adjustment problems. Information gained is also used to develop and pilot a structured family intervention. Previous research has shown that TBI results in substantial distress for a majority of family members. Research conducted with parents of children with TBI indicates that preinjury family functioning has an impact on children's outcome. Similar studies have not been conducted with the population of adults with TBI. In this project data is collected at three Model System Centers: The Institute for Rehabilitation and Research (TIRR), Mississippi Methodist Rehabilitation Center (MMRC), and the Mayo Medical Center (MAYO); data collection is integrated with the current Model Systems Research Protocol. Systematic dissemination activities are designed to target consumers (people with TBI and their families) and rehabilitation professionals.

Effects of Methylphenidate on Working Memory and Cerebral Glucose Metabolism in Persons with Severe Traumatic Brain Injury

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Houston, TX 77030
hlevin@bmc.tmc.edu

Principal Investigator: Harvey S. Levin, PhD
Public Contact: 713/798-4860; Fax: 713/798-1456

Project Number: H133A980073
Start Date: December 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $279,903

Abstract: This project conducts a multicenter clinical trial of methylphenidate (MPH) to treat deficits in working memory and other cognitive impairments resulting from severe traumatic brain injury (TBI). MPH is a potentially cost-effective intervention that could mitigate frequent and disabling cognitive impairments and thereby improve the lives of people with TBI, their families, and caregivers. By using functional brain imaging to identify the mechanism through which MPH improves cognitive functioning, the project seeks direction for developing pharmacologic interventions for people with TBI. A total of 144 people with severe TBI are recruited at three TBI Model Systems Centers (The Institute for Rehabilitation and Research, Houston, TX, the Department of Rehabilitative Medicine, University of Washington, Seattle, WA, and the Rehabilitation Institute of Michigan, Detroit, MI. All are to have a working memory deficit on one or both screening tests and no medical contraindications for MPH treatment; they are randomized to 3 conditions; randomization is stratified by center and recovery phase. Working memory, long term memory, processing speed, everyday memory, and productivity in performing adaptive activities, is assessed at pretreatment baseline. Subsets of participants also undergo positron emission tomographic scanning to evaluate changes in cerebral glucose metabolism. Results are disseminated through publications, presentations, and internet media to NIDRR Model Systems network investigators, other researchers, rehabilitation providers, family members, and payors.

Model System for Burn Injury Rehabilitation

University of Colorado Health Sciences Center
School of Medicine
Department of Preventive Medicine and Biometrics
4200 East Ninth Avenue, Box B119
Denver, CO 80262
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http://mama.uchsc.edu/pub/nidrr

Principal Investigator: Dennis C. Lezotte, PhD, 303/315-6873
Public Contact: Rebecca Sloan, Database Administrator, 303/315-0320; Fax: 303/315-3183

Project Number: H133A980055
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $125,000
Abstract: The Burn Model System/Data Coordinating Center (BMS/DCC) works for and regularly communicates with all clinical BMS principal investigators and their staff to provide the necessary technical, data management, research, and data analysis support for evaluating burn care and rehabilitation outcomes. The DCC and all sites periodically assess specific data elements and operational definitions to become part of a common data dictionary that supports broad-based health services and resource utilization research. The activities of the DCC include developing strategies for establishing and deploying methods to: (1) ensure standard data collection over time; (2) retrieve and integrate each clinical center's common dataset into a combined database; (3) perform essential quality control checks and distribute site-specific error reports; (4) compile and distribute annual program summaries; (5) perform and monitor statistical analyses required of the combined database; (6) assist in the design and support of special ad-hoc research projects; and (7) assist in the dissemination of summary and scientific reports addressing the utility and effectiveness of Burn Model System clinical and rehabilitation strategies.

Johns Hopkins University Burn Injury Rehabilitation Model System

Baltimore Regional Burn Center
Johns Hopkins Bayview Medical Center
4940 Eastern Avenue
Baltimore, MD 21224
jfauerba@jhmi.edu; delateur@jhmi.edu
http://www.med.jhu.edu/rehab

Principal Investigator: James A. Fauerbach, PhD; Barbara J. deLateur, PhD, 410/550-0894 (Fauerbach); 410/532-4717 (deLateur)
Public Contact: Fax: 410/550-1165 (Fauerbach) 410/532-4719 (deLateur)

Project Number: H133A70025
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $294,375; FY 98 $294,375

Abstract: This project provides a systemized protocol for the care of pediatric and adult patients with severe burn injuries through a comprehensive and integrated program of research. The protocol is expected to serve as a platform for an accessible and compatible database containing all relevant data. The project validates and develops normative data for several measures related to physical, psychosocial, and vocational outcomes (self-selected walking speed task, hand function test, adjustment to disfigurement, generic and burn-specific quality-of-life tests). Additionally, the project conducts studies evaluating innovative methods of reducing functional impairment due to secondary complications, such as cross-joint contractures, deconditioning, post-trauma distress, disfigurement-related distress, and enhancing vocational quality of life and educational outcomes, including a vocational rehabilitation intervention and a school-based rehabilitation intervention. Experts provide training to generalist health care professionals serving burn survivors in remote and rural regions. Finally, researchers conduct collaborative studies with the University of Washington Model System and the New York Hospital Center/Cornell University.

Model System for Burn Injury Rehabilitation

University of Texas
Southwestern Medical Center
Medical and Rehabilitation Department
5323 Hines Boulevard
Dallas, TX 75235-9136
rholav@mednet.swmed.edu

Principal Investigator: Phala Helm, 214/648-2288
Public Contact: Radha Holavanahalli, 214/648-9540; 214/648-3654; Fax: 214/648-2205

Project Number: H133A70023
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $295,000; FY 98 $295,000
Abstract: This multidisciplinary, comprehensive, and coordinated system conducts emergency, medical/surgical, rehabilitation, psychosocial, and vocational activities. To address the goal of prevention of secondary complications, the project conducts two site-specific studies: (1) comparing use of sustained stretching with and without paraffin, and (2) comparing serial splinting with serial casting. To develop and evaluate rural outreach programs, the project has established two quarterly clinics in rural areas of northeast Texas, and plans to initiate a third clinic in Fort Worth Texas. Also, two collaborative research projects develop and evaluate functional outcome measures: (1) development and validation of a new physical functional outcome tool, and (2) assessment of the SF-36 as a measure of community integration and quality of life. The project provides medical rehabilitation and psychosocial interventions for people with burn injury, including children. Interventions are evaluated by addressing several research questions. Also, children are evaluated by addressing outcomes that may vary as a function of the services they received or the compliance of their families with treatment.

Pediatric Burn Injury Rehabilitation Model System

University of Texas Medical Branch
301 University Boulevard
Galveston, TX 77555
dherndon@sbi.utmb.edu

Principal Investigator: David Herndon, MD
Public Contact: 409/770-6731; Fax: 409/770-6919

Project Number: H133A70019
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $295,000; FY 98 $295,000
Abstract: This project builds and analyzes a database of information on children and burns, including measures of cardiopulmonary function, physical growth and maturation, bone density, range of motion, activities of daily living, scar formation, reconstructive needs, and measures of psychosocial adjustment. Analysis determines areas that require improvement and measures of functional outcome that can be used in the evaluation of treatment methods. Additionally, the project improves outcomes by instituting and evaluating two modifications to current rehabilitation for children with large severe burn injuries. First, an intensive inpatient rehabilitation program includes rigorous active resistance exercise training and daily care directed by the complete medical and psychosocial rehabilitation team. Effectiveness is compared with functional outcomes achieved in traditional home-based programs. Second, the use of chronic growth hormone therapy is evaluated to increase growth, strength, bone density, function, and well-being. The project assesses current methods of treatment that subdue effects of scar formation. The project's Community Resources Training Program operates in conjunction with selected existing outreach clinics and school reintegration programs.

University of Washington Burn Injury Rehabilitation Model System

University of Washington
Harborview Medical Center
Box 359796
325 Ninth Avenue
Seattle, WA 98104
palacpac@u.washington.edu
http://weber.u.washington.edu/~jaycee

Principal Investigator: Loren H. Engrav, MD, 206/731-3209
Public Contact: Dolores Palacpac, 206/731-2866; Fax: 206/731-3656

Project Number: H133A70014
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $295,000; FY 98 $295,000
Abstract: This model system: (1) identifies and evaluates techniques to prevent secondary complications; (2) develops and evaluates programs that improve follow-up services for rural populations; (3) develops and evaluates measures of functional outcome for burn rehabilitation; and (4) identifies and evaluates interventions, including vocational rehabilitation and special education interventions, to improve psychosocial adjustment, quality of life, community integration, education, and employment-related outcomes.

Model Spinal Cord Injury System

University of Alabama/Birmingham
Spain Rehabilitation Center
1717 Sixth Avenue South, Room 506
Birmingham, AL 35233-7330
jackson@sun.rehabm.uab.edu
http://www.sci.rehabm.uab.edu/docs/modeluab.htm

Principal Investigator: Amie B. Jackson, MD
Public Contact: 205/934-3330 (V); 205/934-4642 (TTY); Fax: 205/975-4691

Project Number: H133N50009
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project is a research and demonstration model of a comprehensive service-delivery system from point of injury through intensive and acute medical care, rehabilitation management, and long-term community follow-up. Emphasis is on collaborative clinical research to solve the medical management and acute rehabilitation problems of people with spinal cord injury. A national SCI statistical center has also been established to coordinate data collection.

Model Spinal Cord Injury System

Los Amigos Research and Education Institute, Inc. (LAREI)
Rancho Los Amigos Medical Center
7601 East Imperial Highway, HB117
Downey, CA 90242-4155

Principal Investigator: Robert L. Waters, MD, 562/401-7048
Public Contact: 562/401-7161; Fax: 562/803-5623

Project Number: H133N50020
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project is a research and demonstration model of a comprehensive service-delivery system from point of injury through intensive and acute medical care, rehabilitation management, and long-term community follow-up. The scope of work emphasizes collaborative clinical research to solve the medical management and acute rehabilitation problems of spinal cord injury. The model system concept has been maintained for continued study of service delivery.

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Northern California Model Spinal Cord Injury System

Santa Clara Valley Medical Center (SCVMC)
Medical Staff Corporation
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San Jose, CA 95128
tbisci@tbi-sci.org
http://www.tbi-sci.org

Principal Investigator: Peter C. Werner, MD; Karyl M. Hall, EdD, 408/885-2000
Public Contact: 408/295-9896, ext. 16; Fax: 408/295-9913

Project Number: H133N50003
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project's multidisciplinary system provides comprehensive rehabilitation services to meet consumer needs from point of injury (emergency treatment and transportation) through acute care, rehabilitation (vocational and education preparation), community and job placement, and long-term follow-up. The project is: (1) demonstrating and evaluating the development and application of improved methods and equipment essential to the care, management, and rehabilitation of the SCI patient; (2) demonstrating methods of community outreach and education for individuals with spinal cord injuries in injury prevention, housing, transportation, recreation, employment, and other community activities; and (3) conducting collaborative and site-specific research on spinal cord injury, its consequences and outcomes, and innovative methods of treatment, including national database studies.

Rocky Mountain Regional Spinal Injury System

Craig Hospital
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Project Number: H133N50001
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project is a research and demonstration model of a comprehensive service-delivery system from point of injury through intensive and acute medical care, rehabilitation management, and long-term community follow-up. The scope of work emphasizes collaborative clinical research to solve the medical management and acute rehabilitation problems of spinal cord injury. The model system concept has been maintained for continued study of service delivery.

Georgia Regional Model Spinal Cord Injury Care System

Shepherd Center, Inc.
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Principal Investigator: David F. Apple Jr., MD
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Project Number: H133N50022
Start Date: September 30, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Georgia Regional Spinal Cord Injury Care System is part of a 100-bed specialty hospital, Shepherd Center, in Atlanta Georgia. It has been a member of the model system since 1982, and during the current five-year funding period, it is conducting detailed data collection on individuals who meet the inclusion criteria (approximately 100 per year). Data is being shared with the National Spinal Cord Injury Statistical Center at the University of Alabama/Birmingham. The research component of this project is based on a large collaborative effort on gender- and culture-sensitive issues in care delivery. Additionally, a site-specific project on violence-related injuries is under way. Finally, the Georgia system participates in five additional collaborative efforts being directed by other members of the 18-facility system.

Model Spinal Cord Injury System

Northwestern University
Northwestern Memorial Hospital
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Principal Investigator: Paul R. Meyer Jr., MD, MM
Public Contact: Marta Slechta, 312/908-3425; Fax: 312/908-1819

Project Number: H133N50002
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Midwest Regional Spinal Cord Injury Care System (MRSCICS) incorporates comprehensive medical-surgical acute spinal cord injury care within Northwestern Memorial Hospital, and a comprehensive rehabilitation and vocational patient care program within the Rehabilitation Institute of Chicago. Both activities fall under the umbrella of Northwestern University. The system's priorities include clinical spinal cord care and academic research through the search for new scientific knowledge effecting improved patient care and enhanced neurological recovery.

Special Projects and Demonstrations for Spinal Cord Injuries

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Principal Investigator: Shankur Nesathurai, MD
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Project Number: H133N50014
Start Date: September 15, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $445,271; FY 98 $373,000
Other funding: FY 96 $46,623 (Sources: Boston University Medical Center Hospital, Boston Violence Prevention Program)
Abstract: This project demonstrates a strong, comprehensive system of care for people with spinal cord injury (SCI), with special emphasis on: (1) an innovative approach to managed and primary care for Medicaid recipients; (2) an ongoing commitment to the urban community within which the New England Regional Spinal Cord Injury System resides; (3) the development of a violence prevention program to assist with the community reintegration of youth with SCI caused by intentional violence; and (4) the education of providers, consumers, vocational counselors, and payers with respect to the practical use of assistive technology.

University of Michigan Model Spinal Cord Injury System

University of Michigan
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model.sci@umich.edu
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Project Number: H133N50012
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project demonstrates and evaluates the comprehensive system of lifetime care provided by the University of Michigan Medical Center beginning at the time of injury. Research to expand current knowledge needed to improve rehabilitation and community integration outcomes is conducted in an environment employing a participatory action research model that addresses the universe of disability and contemporary issues. Improved methods of SCI service and equipment are demonstrated and evaluated through utilization of technology, outcomes prediction, and family/consumer empowerment. Access to and utilization of services and research information are promoted by collaboration in national studies and by outreach and educational efforts targeting people with SCI, their families, and professionals and students of rehabilitation and related fields. A model for providing independent living follow-up services to enhance community reintegration, established at the U-M Medical Center in 1985, is demonstrated and evaluated in collaboration with five other Model SCI Systems. Further research activities focus on family function as a predictor of independence, employment, growth curve characteristics of functional independence measure, aging, quality of life, and relationship of neurogenic pain to function.

Southeastern Michigan Spinal Cord Injury System

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Principal Investigator: Bruce Becker, MD
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Project Number: H133N50006
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Southeastern Michigan Spinal Cord Injury System is a research and demonstration model of a comprehensive system of spinal cord injury (SCI) care, from point of injury through emergency services, acute medical care at Detroit Receiving Hospital, rehabilitation management at the Rehabilitation Institute of Michigan, and long-term community follow-up. The scope of work includes evaluation of the costs and benefits of this system, contribution to the national database of the SCI model systems, and collaborative and local research to solve medical management and rehabilitation problems.

Missouri Model Spinal Cord Injury System

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Principal Investigator: Kristofer Hagglund, PhD, 573/882-6271 (V)
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Project Number: H133N50005
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project is a research and demonstration model of a comprehensive, community-based service-delivery system for people with spinal cord injury (SCI), from point of injury through community integration. The model emphasizes consumer involvement in all aspects of care and collaboration with local, community-based organizations to facilitate independent living. The scope of work also emphasizes development of innovative health care, rehabilitation, and community outreach delivery systems for women, racial and ethnic minorities, and rural populations. Research focuses on evaluation of the costs and efficiency of the model and its ability to improve quality of life for people with SCI, family, and significant others. Training, dissemination of information, and contribution to the national database of the SCI model systems are integral components of the project.

Northern New Jersey Model Spinal Cord Injury System

University of Medicine and Dentistry of New Jersey Medical School
Kessler Institute for Rehabilitation
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Principal Investigator: Joel A. DeLisa, MD
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Project Number: H133N50013
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Northern New Jersey Model Spinal Cord Injury System demonstrates and evaluates multidisciplinary, comprehensive rehabilitation services to meet patient needs beginning with prevention and emergency medical services and extending through intensive care, acute care, and medical rehabilitation, to long-term follow-up, community reintegration, and vocational rehabilitation. The model system incorporates a well-formulated violence prevention program, a comprehensive substance abuse treatment and prevention program, an innovative spiritual counseling program, and a roving symposium program emphasizing independent living. The project emphasizes clinical research, including controlled studies of innovative new programs, to improve the outcomes of spinal cord injury survivors.

Mount Sinai Spinal Cord Injury Model System

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Project Number: H133N50008
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Mount Sinai Spinal Cord Injury Model System demonstrates and evaluates interdisciplinary, comprehensive rehabilitation services to meet the needs of individuals with spinal cord injury from point of injury through acute care, rehabilitation (physical, occupational, vocational, psychological, recreational, and vocational therapies), long-term follow-up, and community reintegration. The program emphasizes peer mentoring, advocacy, health promotion/wellness, and education.

Model Spinal Cord Injury Systems
Ohio

Northeast Ohio Regional Spinal Cord Injury System

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Principal Investigator: Frederick M. Maynard, MD
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Project Number: H133N50018
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The objectives of this project relate to three major goals in the field of spinal cord injury care: (1) to develop and study effective new *solutions* to problems, not the problems themselves; (2) to promote consumer-driven change in a fragmented and cumbersome service-delivery system; and (3) to place appropriate emphasis on solving problems that arrive during the chronic phase of SCI. Activities of this project: (1) develop and demonstrate a comprehensive system of spinal cord injury care delivery; (2) demonstrate and evaluate creative means by which consumers with disabilities can organize and promote models of service delivery in an environment of managed medical care; (3) develop an innovative method aimed at improving community reintegration outcomes for people who are disadvantaged by minority or economic status; (4) participate fully and effectively in the collaborative data collection research effort of the Model Regional SCI Care System Program of NIDRR; (5) focus on means by which benefits of provided services can be measured concurrently with an analysis of cost implication of service delivery; and (6) broaden and strengthen educational offerings made available to consumers, service delivery providers, and the general public.

Model Spinal Cord Injury System

Thomas Jefferson University
Jefferson Medical College
11th and Walnut Streets
Philadelphia, PA 19107
http://jeffline.tju.edu/CWIS/DEPT/Rehab/spinalcord/index1.html

Principal Investigator: John F. Ditunno Jr., MD
Public Contact: Mary Call, RN, Data Coordinator, 215/955-6579; Fax: 215/955-5152

Project Number: H133N50021
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This system conducts patient care, research, and education for people with traumatic spinal cord injury. Thomas Jefferson University Hospital and Magee Rehabilitation Hospital in Philadelphia work to provide a continuum of coordinated services to people in southeastern Pennsylvania, southern New Jersey, and northern Delaware.

Model Spinal Cord Injury System

The Institute for Rehabilitation and Research (TIRR)
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Houston, TX 77030
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Principal Investigator: R. E. Carter, MD, 713/797-5910 (V)
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Project Number: H133N50007
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: Within a system-wide research environment, this multidisciplinary service system: (1) demonstrates and evaluates services and the costs and benefits of those services, (2) demonstrates and evaluates the application of improved methods and equipment, (3) demonstrates methods of community outreach and education, and (4) participates in national studies of the benefits of a spinal cord injury (SCI) service system. This system addresses projects related to: violence-related spinal cord injuries, maximizing interactions with independent living centers, substance abuse among individuals with SCI, disability and rehabilitation-related problems of people with SCI from minority backgrounds, the role of families and personal advocacy in successful community reintegration, and adoption of the SCI systems model of care into the practice of regular health care delivery. This system also houses the database of all presentations and educational materials developed by the nationwide network of Model Spinal Cord Injury System centers.

VCU/MCV Spinal Cord Injured (SCI) Model System

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Principal Investigator: William O. McKinley, MD
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Project Number: H133N50015
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Virginia Commonwealth University/Medical College of Virginia (VCU/MCV) Model System of Care for individuals with spinal cord injury merges the best health care practices with an underlying foundation of consumer advocacy, patient education, and individual consumer empowerment. The VCU/MCV Model System project consists of six individual subprojects: Clinical Pathway Outcomes for SCI, Innovative Medical Issues, Dual Disability: Concomitant SCI and Traumatic Brain Injury (TBI), Community Reintegration, Consumer Advocacy, and Substance Abuse. The project: (1) explores clinical pathway outcomes across the continuum of care; (2) evaluates innovative medical issues related to SCI using interactive computer-based education; (3) delineates the incidence of, and formulates management strategies for, the rehabilitation of people with the dual diagnosis of SCI and TBI; (4) institutes several community integration projects in the areas of transportation, return to work, and recreation for people with SCI; (5) develops a statewide network for advocacy for people with disability; and (6) identifies incidences and treatment strategies for people with SCI and substance abuse.

Northwest Regional Spinal Cord Injury System

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http://weber.u.washington.edu/~rehab/sci

Principal Investigator: Diana D. Cardenas, MD
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Project Number: H133N50025
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: The Northwest Regional Spinal Cord Injury System demonstrates and evaluates multidisciplinary, comprehensive rehabilitation services to meet patient needs from point of injury through rehabilitation, including vocational and educational preparation, community and job placement, and long-term follow-up. The project also engages in research and collects and submits data to the National Spinal Cord Injury Statistical Center.

Model Construct for Community Integration in SCI

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Principal Investigator: Dennis Maiman, MD; Irma Fiedler, PhD, 414/259-3645; 414/456-7324
Public Contact: Traci Tymus, CRC, CIRS, Project Coordinator, 414/259-2109; Fax: 414/259-7927

Project Number: H133N50024
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000
Abstract: This project emphasizes and integrates the major research areas relating to SCI through a series of demonstration projects. The individual demonstration projects contribute to overall federal objectives and address problems identified with the research, demonstration services, or data collection aspects of the model SCI system. In the Substance Abuse and Community Reintegration project and the Sexuality project, alterations in clinical approaches are based on the results of the projects. In two others, the nature of the activities, in and of themselves, change current treatment. Dissemination of the results of the demonstration projects, the participation in database collection, and national collaborative studies integrate the role of SCI management in the state of Wisconsin.

Traumatic Brain Injury Care System

University of Alabama/Birmingham
Spain Rehabilitation Center
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novack@sun.rehabm.uab.edu

Principal Investigator: Thomas Novack, PhD
Public Contact: 205/934-3454; Fax: 205/975-4691

Project Number: H133A980010
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger*
NIDRR Funding: FY 98 $345,000

Abstract: The Traumatic Brain Injury Care System (UAB-TBICS) maintains and improves a cost-effective, comprehensive service delivery system for people who incur a traumatic brain injury, from the moment of injury across the life span. The project: studies the course of recovery and outcomes following the delivery of the coordinated system of care; investigates alternative methods of service delivery to people with TBI, exploring emerging technologies to promote recovery; examines key predictors of rehabilitation outcome and costs of care; and places emphasis on home- and community-based activities as well as interventions that maximize community reintegration following TBI. The project establishes and maintains linkages with emergency medical service agencies throughout the state, with state vocational rehabilitation and long-term follow-up programs, with clinically oriented research activities within the UAB-TBICS itself, and with other clinical research programs being conducted at TBI Model Systems nationwide. The program participates in the Model Systems Database, including examining the System benefits, costs, and outcomes.

A Comprehensive System of Care for Traumatic Brain Injury

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Medical Staff Corporation
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Principal Investigator: Karyl M. Hall, EdD
Public Contact: 408/295-9896, ext. 16; Fax: 408/295-9913

Project Number: H133A70018
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 97 $345,000; FY 98 $345,000
Abstract: This program is a comprehensive, interdisciplinary system of care whose rehabilitation program empowers consumers through a clinical program, community services for consumers, several important research studies, and dissemination of information. Clinical services and research studies include: (1) the community Vocational Task Force on vocational issues in brain injury; (2) the Peer Support Program for families and consumers from time of injury through community integration; (3) the Mild Brain Injury (MBI) program, which disseminates an educational brochure to all entering the emergency department who have sustained injuries to the head and those who have sustained an MBI (those who have residual complaints are evaluated for subtle deficits); (4) the Brain Injury University, which emphasizes vocational skills training, including weekend and evening community education programs. The project operates in collaboration with several community agencies.

Rocky Mountain Regional Brain Injury System

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Public Contact: Ken Gerhart, 303/789-8308; Fax: 303/789-8441

Project Number: H133A980020
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000

Abstract: The Rocky Mountain Regional Brain Injury System (RMRBIS) operates a comprehensive system of care, contributes to the National TBI Database, conducts research, and disseminates the results. Collaborating programs include Swedish Medical Center and St. Anthony Hospital, two highly regarded Level I and Level II trauma centers and acute care facilities, and community-based programs that range from Colorado's Medicaid Waiver Program, to private vocational services, to programs for the arts and recreation, that offer lifelong services, ongoing follow-up, and an enhanced quality of life to people with TBI and their families. RMRBIS conducts 13 distinct yet complementary research projects to: (1) compare the various treatment pathways occurring in Colorado; (2) evaluate the effectiveness of vocational and other community-based services; (3) assess the potential of a pharmacological intervention for improving memory; (4) develop and validate neuropsychological tests; (5) improve outcome predictions through the quantification of MRI results and environmental factors; (6) examine the influence of funding alternatives; and (7) seek a better understanding of the roles of violence and substance abuse in TBI.

Georgia Model Brain Injury System (GAMBIS)

Emory University
Center for Rehabilitation Medicine
1441 Clifton Road Northeast, Suite 421
Atlanta, GA 30322

Principal Investigator: Anthony Stringer, PhD
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Project Number: H133A980028
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $345,000
Abstract: The Georgia Model Brain Injury System (GAMBIS) has the capacity to follow approximately 45 percent of the moderate to severe brain injury cases expected annually in metropolitan Atlanta, and combines the academic resources of Emory University and the Crawford Research Institute of Shepherd Center with the clinical resources inherent in four trauma centers, two inpatient rehabilitation programs, and multiple post-acute and subacute rehabilitation pathways. Project activities include: comparisons between the efficacy, cost-effectiveness, and cost per quality-adjusted life year for patients in home-based and facility-based sub-acute care; outcome comparisons between TBI patients grouped by injury severity to determine optimal matches between patients and service delivery methods; the impact of violence as a cause of injury on cost and outcome within all post-acute treatment pathways; studying the efficacy of telecommunications technology and a consumer-directed Clubhouse Program in supporting community and vocational reentry; and the role of traditional (e.g., injury severity, level of insurance benefits) and novel (e.g., progesterone level, apolipoprotein E genotype) predictors of outcome and subjective well-being following TBI. GAMBIS also contributes to the TBI Model Systems National Database.

Model Traumatic Brain Injury Systems
Massachusettes

Traumatic Brain Injury Model System

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Principal Investigator: Mel B. Glenn, MD
Public Contact: Theresa O'Neil-Pirozzi, ScD, 617/573-2456; Fax: 617/573-2469

Project Number: H133A980034
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $345,000
Abstract: This Traumatic Brain Injury (TBI) Model System provides a comprehensive spectrum of care for people with TBI through the collaborative effort of a complex of organizations committed to participation in the Model Systems National Database and a variety of research and demonstration projects. Objectives include demonstrating a comprehensive model system of care for individuals with TBI; investigating the efficacy of alternative service delivery; identifying and evaluating interventions that can improve vocational outcomes and community integration; developing key predictors of rehabilitation outcome, including subjective well-being; determining the relationship between cost, interventions, and outcomes; and examining the implications of violence as a cause of TBI. The six research studies of the project include: (1) responsiveness of the Community Integration Questionnaire and the Supervision Rating Scale; (2) attributes of dysarthric speech as a predictor of successful use of voice recognition software for computer access; (3) efficacy of a group model for including family members in the community integration of the patient with TBI; (4) efficacy of community skills group outpatient therapy; (5) palmtop computer technology as a prospective memory aid for individuals with TBI living in the community; and (6) post-traumatic apathy: analysis, pharmacologic treatments, and outcomes.

Southeastern Michigan Traumatic Brain Injury System/NIDRR TBI Model Systems National Database

Wayne State University and Rehabilitation Institute of Michigan
Department of Physical Medicine and Rehabilitation
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Principal Investigator: Mitchell Rosenthal, PhD, 313/745-9769
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Project Number: H133A70021
Start Date: January 1, 1998
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $344,989 (SEMTBIS); $125,000 (TBI National Database); FY 98 $344,989 (SEMTBIS) $125,000 (TBI National Database)

Abstract: This project maintains and enhances an existing model system of care and conducts collaborative and local research projects including the following: (1) a multicenter collaborative project with existing Traumatic Brain Injury (TBI) Model Systems entitled "Post-Acute Service Delivery: Needs, Interventions, Costs and Outcomes;" (2) the local project "Evaluation of an Enhanced Community-Based Vocational Training Program Serving Economically Disadvantaged Persons with TBI;" (3) rehabilitation outcome, addressed through a combination of multicenter collaborative research and dissemination projects, as well as several local projects; (4) a multicenter collaborative project, "Length of Stay in Inpatient Rehabilitation: Does It Make a Difference?" (5) a local project, "Managed Primary Care for Persons with Traumatic Brain Injury: Prediction of Long-Term Medical Care Utilization and Costs;" (6) a multicenter collaborative project led by this project: "Implications of Violence as a Cause of TBI on Cost, Functional Outcome, and Long-Term Community Integration." The project continues to manage the TBI National Database Center. Additional goals include coordinating research and dissemination activities with other NIDRR TBI grantees to optimize research output, minimize redundancy of effort, and engage in collaborative dissemination.

Model Brain Injury System

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Project Number: H133A980036
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $345,000

Abstract: This Model System enables people with traumatic brain injury (TBI) in the Minnesota region to participate fully in their families, communities, school, and work. The System's 14 studies and projects include: (1) providing the appropriate continuum of care for the approximately 500 people with TBI admitted yearly through the Mayo Level I Trauma Center through an existing Case Coordination system that facilitates access to hospital- and community-based services for community reintegration; (2) determining the long-term outcomes of postacute rehabilitation pathways; (3) evaluating key outcome predictors, including apolipoprotein and genotype; (4) examining the implications of violence for outcome, costs, and special rehabilitation needs; (5) demonstrating innovative postacute rehabilitation and vocational interventions and evaluating their effectiveness through experimental and quasi-experimental designs; (6) further evaluating specialized TBI vocational services at the Mayo Brain Injury Program that result in almost 75 percent of the people served in community-based placements; (7) extending Annegers's previous population-based epidemiological studies of TBI to determine the effect of severity and type of TBI (e.g., violent vs. nonviolent) on outcomes and costs; and (8) developing and testing cost models using prospective and retrospective data and national TBI Model System data.

Traumatic Brain Injury (TBI) Model System of Mississippi (TBIMSM)

Mississippi Methodist Rehabilitation Center
Brain Injury Program
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Principal Investigator: Mark Sherer, PhD
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Project Number: H133A980035
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $345,000
Abstract: The Traumatic Brain Injury (TBI) Model System of Mississippi (TBIMSM) submits data to the national database, collaborates with existing and new TBI Model System projects, and performs a program of research and demonstration, dissemination, and collaborative projects. Issues addressed are of particular importance to people with TBI who live in rural areas such as Mississippi. The System contributes to improved understanding of methods of service delivery; interventions to improve vocational outcomes and community integration; case management; extended job coaching; rural vs. urban outcomes, electrophysiology; awareness and depression; delirium after TBI; key predictors of rehabilitation outcomes; the relationship of cost of care to functional outcomes; and special implications of TBI caused by violence. Two demonstration projects involve a Seizure Clinic and a Spasticity Clinic. Findings are disseminated to people with TBI, their families and significant others, rehabilitation professionals, and makers of public policy both locally and nationally. TBIMSM solicits support, feedback, and guidance from people with TBI, family members, significant others, advocacy agencies, and service agencies to insure that the projects address the needs and concerns of these people and organizations. The system is a collaboration between the Mississippi Methodist Rehabilitation Center and the University of Mississippi Medical Center.

Missouri Model Traumatic Brain Injury System (MOMBIS)

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Project Number: H133A980008
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $344,999

Abstract: This model system, based in central Missouri, provides a continuum of traumatic brain injury (TBI) care to an underserved and understudied population: communities that are primarily rural. The project also completes a series of innovative research programs and contributes data to the national database for TBI Model Systems. MOMBIS develops a model system of care that: (1) investigates the efficacy of alternative methods of service-delivery interventions after inpatient rehabilitation discharge and after other post-acute treatment pathways; (2) identifies and evaluates interventions using emerging technology that can improve vocational outcomes and community integration; (3) develops predictors of rehabilitation outcome, including subjective well-being, at hospital discharge and at long-term follow-up; (4) examines the relationships among cost of care, specific treatment interventions, and functional outcomes; and (5) examines implications of TBI caused by violence on treatment interventions, rehabilitation costs, and long-term outcomes. MOMBIS collects and contributes data on patient characteristics, diagnoses, causes of injury, interventions, outcomes, and costs to a uniform national database; participates in collaborative research with other TBI Model System centers; and coordinates research efforts with other NIDRR TBI-related grant recipients.

Model Traumatic Brain Injury Systems
New Jersey

Northern New Jersey Traumatic Brain Injury System (NNJTBIS)

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Project Number: H133A980030
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $350,000
Abstract: The Northern New Jersey Traumatic Brain Injury System (NNJTBIS) is a comprehensive set of projects designed to improve the quality of care for people with traumatic brain injury (TBI) in New Jersey and to answer selected research questions. In both research and development projects, the NNJTBIS emphasizes the interplay of medical, neuropsychological, social, and economic factors. Three small randomized clinical trials include: an intervention program to train caregivers to manage behavior problems in the home or other natural settings, a program of cognitive remediation and cognitive-behavioral therapy for people with TBI living in the community, and an improvement to a cognitive remediation program involving enhanced choice by the person with TBI. Other research addresses issues of: how to improve outcome measures by incorporating the expressed values and perceptions of people served, financial issues and costs, the implications of violence in the etiology of TBI, substance abuse, and consequences of delay or refusal of Medicaid coverage for severely injured people with TBI. Demonstration projects fill gaps in vocational rehabilitation in New Jersey by providing augmented work trials and education of vocational rehabilitation counselors regarding TBI, develop trial cognitive remediation and social support tools for the Internet, and educate emergency room personnel regarding mild TBI. Educational offerings for people with TBI, their families, and professionals are provided through conferences, retreats, talks, support groups, and development of a TBI resource center. Local advisory boards advise System staff, and plans include a task force to improve the system of care in New Jersey.

The Carolinas Traumatic Brain Injury Rehabilitation and Research System (CTBIRRS)

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Project Number: H133A980025
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $345,000
Abstract: The Carolinas Traumatic Brain Injury Rehabilitation and Research System (CTBIRRS) improves the lives of people with newly acquired traumatic brain injury (TBI) through a comprehensive service delivery system. Research studies investigate: the effectiveness of alternatives to a comprehensive outpatient brain injury day program; the use of a Community Transition Coordinator to improve access to services and enhance community reintegration; the novel use of electronic personal organizers as a memory aid; the predictability of functional outcomes, quality of life, and cost of care for those with TBI; the impact of TBI on spouses and significant others; the efficacy and cost of serial casting versus ultrasound with weight bearing for contractures; epidemiologic characteristics, rehabilitation costs, and the outcome of violence-induced TBI compared to non-violent TBI incidence, as well as the cost and outcome of depression following violence-induced TBI versus non-violent TBI; and the outcomes of those who suffer severe TBI who do not receive inpatient rehabilitation. Five of the studies involve collaboration with other NIDRR Model Systems. In addition, collaboration takes place with a non-Model-Systems NIDRR grantee to address TBI-related issues. CTBIRRS disseminates research findings via telemedicine, free computer and Internet access for people with disabilities, and a web site, as well as local and national committees, programs, conferences, and peer-reviewed publications, and contributes to the national TBI Model System Database.

Ohio Regional Traumatic Brain Injury Model System

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Project Number: H133A70032
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 97 $344,975; FY 98 $344,975
Abstract: The Ohio Regional Traumatic Brain Injury (TBI) Model System serves a population of two million people living in 21 urban and rural counties in central and southern Ohio. It provides specialized care from emergency evacuation through community integration and lifelong living. The project is a collaborative effort of the Ohio State University Medical Center, Ohio Health's Grant Medical Center, and the Ohio Valley Center for Brain Injury Prevention and Rehabilitation.

Oregon Model Traumatic Brain Injury System

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Project Number: H133A980027
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000
Abstract: This model system compares treatment and outcomes among people with TBI cared for within the model system versus those who follow alternative care paths. The sample: (1) includes trauma system patients who remain in Portland and those who return to rural homes after discharge, allowing for a comparison of care paths as determined by environment; (2) assesses outcome based on the type and extent of care by evaluating payer programs by level and type of funding; and (3) develops and validates two key predictors of outcome: a measure of acute care and a social adjustment scale. This understanding of outcomes as determined by care path (model vs. alternative), environment (rural vs. urban), and payer program (level of funding) is used to address the three primary needs of Oregon residents with TBI and their families: information, access, and quality. Ancillary demonstration projects implement and evaluate caregiver training and home-based multidisciplinary rehabilitation as an alternative to post-acute treatment interventions, using a random controlled experimental design.

A Model System of Brain Injury Care in the Philadelphia Region

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Project Number: H133A70033
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 97 $345,000; FY 98 $345,000

Abstract: This traumatic brain injury (TBI) model system of care serves people with TBI and their families from the tri-state area of Pennsylvania, New Jersey, and Delaware. This project is intended to enhance the existing service system by adding a longitudinal data acquisition component with expanded quality-of-life content. This allows fuller examination of the outcomes achieved and factors that might improve those outcomes. In addition, the project addresses 11 important research topics designed to improve future rehabilitation care, including studies of interventions for motor function, attention, vocational re-entry, and community integration, as well as projects designed to improve prediction of functional outcomes and rehabilitation charges, and to assess cost-effectiveness. The project is a collaboration among the trauma services of Temple University Hospital and Albert Einstein Medical Center, the Drucker Brain Injury Center at MossRehab, Bryn Mawr Rehabilitation, and Magee Rehabilitation Hospitals.

Traumatic Brain Injury Model System of TIRR

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Project Number: H133A70015
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $345,000; FY 98 $345,000
Abstract: This project develops and demonstrates a comprehensive, multidisciplinary rehabilitation services model system for people with traumatic brain injury (TBI). The project: (1) investigates the efficacy of alternative methods of service delivery interventions after inpatient rehabilitation discharge and after other postacute treatment pathways; (2) identifies and evaluates interventions, including those using emerging technology, that can improve vocational outcomes and community integration; (3) develops key predictors of rehabilitation outcome, including subjective well-being at hospital discharge and at long-term follow-up; (4) determines the relationship between cost of care, specific treatment interventions, and functional outcomes; and (5) examines the implications of violence as a cause of TBI on treatment interventions, rehabilitation costs, and long-term outcomes. In carrying out these purposes, the project participates in clinical and systems analysis studies of the Traumatic Brain Injury Model Systems by collecting and contributing data on patient characteristics, diagnoses, causes of injury, interventions, outcomes, and costs, to a uniform, standardized national database. It participates in collaborative projects with other model system programs and coordinates research efforts with other NIDRR grantees that address TBI-related issues.

Virginia Traumatic Brain Injury Model System

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Project Number: H133A980026
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $345,000

Abstract: The Virginia Traumatic Brain Injury Model System has four research projects and three demonstration projects. The System: (1) examines the needs, outcomes, and costs of alternative service delivery systems; (2) examines the etiology and incidence of rehospitalization in the one-to-four years following TBI to evaluate predictors of acute rehospitalization and to characterize the relationship between rehospitalization and long-term outcomes; (3) investigates identification and placement practices in secondary schools and tracks educational and vocational outcomes for youth with TBI, and identifies best practices to facilitate mainstreaming and optimal educational and vocational outcomes; (4) compares the costs of violent injury to the costs of other causes, identifies the types and intensities of services used by victims of violence, relates the intensity of services to payer source and other demographic information, evaluates long-term implications by assessing employment, community integration, substance abuse status, and subjective well-being, and identifies characteristics that predispose to violent injury; (5) assesses vocational outcomes in return-to-work interventions for people with mild and moderate brain injuries; (6) develops, with consumer input, a consumer education and self-advocacy workshop to be given throughout the state; and (7) develops a "best practices" handbook on work supports for people with brain injury that is field tested and disseminated via the Internet and other avenues.

The University of Washington Traumatic Brain Injury Model System

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Project Number: H133A980023
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000
Abstract: The University of Washington Traumatic Brain Injury Model System operates a comprehensive, multidisciplinary Model System of Care serving people with TBI from the time of injury to integration into the community. The System: performs innovative research and demonstration projects; participates in clinical and systems analyses by contributing to a uniform, standardized national database; collaborates with other model system sites in addressing TBI-related issues; and engages in dissemination activities that include professionals, people with brain injury and their families, and the community at large. The Department of Rehabilitation Medicine at the University of Washington Academic Medical Center, which includes Harborview Medical Center and the University of Washington Medical Center collaborate to conduct: a randomized, controlled trial examining the impact of scheduled, system-initiated telephone intervention on outcome (including employment and community integration); two studies examining the state and federal costs of TBI, and cost-effectiveness of the randomized study; two complementary studies examining early costs and discharge decisions in violence-related TBI and the relationship among violence, rehabilitation services received, and long-term outcome; a study examining long-term outcome as a function of alternative pathways of post-acute treatment; and three demonstration projects, with two using technology to develop community-based resources and professional communication.

Functional and Rehabilitation Outcomes of Patients Who Have Developed Guillain-Barre Syndrome

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Project Number: H133G70032
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $116,993; FY 98 $121,585
Abstract: This study provides the data necessary to describe the significance to rehabilitation of Guillain-Barre Syndrome (GBS). GBS is the most common cause of acute neuromuscular paralysis in developed countries, afflicting about 5,000 people annually in the United States. However, the extent and duration of physically disabling secondary results of GBS, including the incidence of secondary medical complications, have never been described. Vocational and psychosocial outcomes have also not been assessed. Without a prospective analysis of such outcomes, the magnitude of the problems GBS presents for the rehabilitation community remains unknown and appropriate resources and pro-active treatment approaches are not allocated and developed. In this project results of pilot studies and a database-building data collection effort are used to develop new and refined research questions and hypotheses, and build appropriate mechanisms into the database to address those questions. The database is built upon the collective experience of an investigative team that has successfully developed and maintained the National Spinal Cord Injury Statistical Center (NSCISC).

Amantadine to Improve Neurorecovery in TBI

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Project Number: H133G80025
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $121,290

Abstract: This project attempts to establish the efficacy and detrimental effects of amantadine in the acute stages of recovery from traumatic brain injury (TBI). Because TBI is one of the most significant causes of disability to able-bodied people in the most productive period of life, this research may reduce a significant disability and economic burden. The most common cause of TBI is high-speed transportation accidents; such accidents result in a mechanism of injury commonly described as diffuse axonal injury, which results in a decrease in dopamine turnover in the brain, leading to some degree of impaired initiation and attentional deficits. Research suggests that increasing dopamine turnover at the synaptic level may have a beneficial effect on recovery from brain injury. Amantadine has been the subject of considerable interest and clinical use; however, the definite beneficial effect of amantadine on brain injury recovery has never been demonstrated. Because amantadine is generically available, the private sector shows little interest. The study design is a double-blind, randomized, controlled trial using well-established outcome measures, including behavioral and cognitive measures.

Post-Traumatic Epilepsy in Traumatic Brain Injury

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Project Number: H133G50013
Start Date: July 1, 1995
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 95 $125,000; FY 96 $125,000; FY 97 $125,000; FY 98 (No-cost extension through 6/30/99)
Abstract: This multicenter study works to develop a natural observation to identify which individuals with a traumatic brain injury are at highest risk for seizures beyond the first week of injury. All patients with a traumatic brain injury admitted to Santa Clara Valley Medical Center, Denver General Hospital, Detroit Receiving Hospital, and Medical College of Virginia Hospital are eligible to enroll in the study if they meet the inclusion criteria. Patient information is analyzed on a case-by-case basis. Incidence of seizures and length of time using the anticonvulsant drug Dilantin is compared with published incidence figures. Seizure events up to seven days postinjury are documented and treated clinically by medical and nursing staff responsible for the patient. After hospital discharge, research associates make monthly verbal contact with each subject to determine if a seizure has occurred.

Marketing Health Promotion, Wellness, and Risk Information to Spinal Cord Injury Survivors in the Community

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Project Number: H133G80011
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $124,995

Abstract: Building on experience gained from the RRTC in Aging with Spinal Cord Injury (SCI) at Craig Hospital, this project offers health promotion, wellness, and risk information to SCI survivors. Recent reports from survivors, caregivers, and researchers are demonstrating that SCI is not the unchanging disability it was once thought to be; over time many survivors face medical complications, psychosocial concerns, and diminishing quality of life. Although many of these adverse outcomes could be averted or lessened with active health maintenance and wellness strategies, SCI survivors in the community face a dearth of the information they need to make such positive lifestyle choices.This project creates: (1) a Wellness and Risk Assessment Profile that provides individualized SCI-specific health risk appraisals via the Internet; (2) regular health information columns in three widely-read consumer journals; (3) custom brochures targeting the prevention and health promotion needs of SCI survivors in the community; (4) a handbook offering information about making wise health and lifestyle choices for recently injured SCI survivors; (5) a handbook targeting caregivers of SCI survivors; and (6) a curriculum for people who teach and provide support to caregivers.

Toward a Risk Adjustment Methodology for People with Disabilities

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Project Number: H133G70072
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $124,983; FY 98 $124,401

Abstract: This knowledge dissemination project provides information to health care policy makers and payers that advances development of a risk adjustment system for working- and retirement-age people with disabilities. Risk adjustment reduces the incentive for risk selection and promotes access to needed health services. To achieve this goal, the project assembles a panel of leading experts on risk adjustment and disability to guide the development of a consensus report that: (1) details the state of science in risk adjustment, (2) evaluates the appropriateness of health care outcome indicators for people with physical and mental disabilities, and (3) provides a set of recommendations for modifying and implementing risk adjustment methodologies that enhance access to health services for people with disabilities enrolled in public and private sector health plans.

Aging and Adjustment After Spinal Cord Injury: A Twenty-Five Year Longitudinal Study

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Project Number: H133G70111
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $124,796; FY 98 $122,475

Abstract: People are now living longer after spinal cord injury (SCI), yet only limited research has addressed issues of aging and life adjustment after SCI. The purpose of this study is to implement the fifth stage of data collection to a 25-year longitudinal study that has traced the course of life adjustment after SCI over the past two decades. The unique contributions of this data collection include: (1) inclusion of nearly 100 participants who have been injured more than 30 years, (2) first-time longitudinal comparisons among large samples of women and racial/ethnic minorities (including more than 200 minority participants, 63 of whom are women), and (3) use of consumer advisory groups to help to identify factors accounting for change.

Relation of Rehabilitation Intervention to Functional Outcome in Acute and Subacute Settings

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Project Number: H133G60135
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000

Abstract: Seven rehabilitation facilities that provide acute medical rehabilitation are assessing rehabilitation outcomes and predictors of outcomes, using a method for assessing rehabilitation therapy goals, activities, and barriers to goal attainment. This project is extending that study. It uses the same methodology used by five sites that provide *subacute* rehabilitation. Being assessed are: (1) patient attributes at admission, such as impairment severity, comorbid conditions and complications, functional deficits, and demographic characteristics; (2) therapeutic interventions (type, quantity, duration, modality, and intensity) provided in acute and subacute settings; and (3) outcomes achieved (functional status, discharge destination, and patient satisfaction). The lead project, the NIDRR-funded RRTC on Functional Assessment and Evaluation of Rehabilitation Outcomes, was awarded to the State University of New York.

Enhancement of Upper Limb Functional Recovery in Stroke Using a Computer-Assisted Training Paradigm

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Project Number: H133G80063
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $124,992

Abstract: This study investigates use of a novel computer-assisted isometric training regime to overcome abnormal movement synergies following hemiparetic stroke. These deficits in coordination are expressed in the form of abnormal muscle synergies and result in limited and stereotypic movement patterns that are functionally disabling and often debilitating, but that are not understood. Current neurotherapeutic approaches to the amelioration of these abnormal synergies have produced, at best, limited functional recovery. The effect of two training regimes on functional movement are being investigated in 40 hemiparetic stroke subjects. The first training regime uses a general, classical strengthening protocol to increase torque production in specific directions. The second, novel regime strengthens subjects using torque combinations that require the subject to deviate progressively from their abnormal torque synergies. Assessment of the effectiveness of these two regimes is based on quantitative comparisons of voluntary upper limb movements performed pre- and post-training.

Mild Traumatic Brain Injury in High School Football

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Project Number: H133G70087
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $122,981; FY 98 $120,525

Abstract: The goal of this multidiscipline research project is to conduct an intensive exploration of factors related to mild traumatic brain injury (MTBI) in youth. Even with clear and specific criteria for discriminating minor from moderate or severe brain injury, several factors may affect the reliability of MTBI classification. For accurate diagnosis, reliable observers must be present. The presence of multiple trauma in some cases may compound and prolong the disability, and may also make it difficult to distinguish the cause of some forms of symptomatology. The effects of alcohol or other drugs, when present, often mimic symptoms of MTBI, further confounding its diagnosis. Given these potential problems, Tulane University has chosen to study minor brain injury within the context of high school football. A population of young athletes participating in organized football allows for a more controlled study, due to the fact that additional massive trauma is absent, trained individuals are present at the time of injury, and secondary complications rarely occur that further brain injury.

Measuring Functional Communication: Multicultural and International Applications

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Project Number: H133G70055
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: The long-term objective of this project is to improve the quality of life for adults with communication disabilities by expanding and validating an assessment tool for multicultural and international populations. Assessments can then be made regarding communication functions and needs, and rehabilitation can be individualized to optimize the person's ability to communicate in their natural environments. Reliable communication skills are a requisite for individuals to achieve their social, educational, and vocational potentials, and for patients to understand and participate in their care and recovery. Activities of this project include: (1) development of a supplemental measure of quality of communicative life; (2) validation of the extended American Speech-Language-Hearing Association Functional Assessment of Communication Skills for Adults with multicultural groups including African Americans, Asian Americans, Caucasian, Hispanic, and Native Americans; (3) validation with various populations with communication disorders such as those caused by brain injury, stroke, Alzheimer's disease and related dementias, and acquired neurological disorders; and (4) validation in other English-speaking countries.

Quantitative Assessment of Rehabilitation for Patients with Cerebellar Dysfunction

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Project Number: H133G60045
Start Date: July 1, 1996
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 96 $99,988; FY 97 $99,988; FY 98 $99,988
Abstract: This project: (1) determines the efficacy of cerebellar rehabilitation in 48 patients with locomotor instability caused by cerebellar dysfunction (CbD); (2) quantifies and characterizes the balance and functional limitations of patients with CbD during standing and locomotor activities of daily living (ADL) performance tests; (3) determines the relationship between commonly used clinical and laboratory locomotor ADL functional limitation indicators, and vestibulo-cerebellar function tests in patients with CbD; and (4) investigates cerebellar rehabilitation techniques that can be employed readily in any clinical setting, for a major cause of disability--balance impairment--in a group of patients with clear cerebellar causes of balance impairment. The methods used to assess the effectiveness of the rehabilitation include sophisticated and expensive equipment that may not be available to most clinicians, but the measurements are isolated from the rehabilitation process, so results can be applied to "low technology" measurements and treatment approaches accessible in any clinic.

The Parenting Options Project: A Development Project for Parents with Psychiatric Disabilities

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Project Number: H133G70079
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $125,000; FY 98 $124,408
Abstract: The purpose of this project is to develop new rehabilitation techniques focusing on parents with psychiatric disabilities, an emerging population whose needs often have been ignored by rehabilitation specialists and mental health service providers. Existing parent education programs often are based on traditional clinical models developed for children at risk of child abuse, or models developed for parents without disabilities. Because consumers are not active participants in program development, existing services often are irrelevant to parents with psychiatric disabilities, and may present barriers to parents' participation. No parent skills training model has been developed with systematic input from all stakeholders, and no goal-setting or assessment tool exists for this significant domain of adult functioning. Employing participatory action research (PAR) strategies, the project's goals are to: (1) develop an education and skills training curriculum for parents with psychiatric disabilities, (2) develop a goal-setting and assessment tool for parents and their helping professionals, and (3) evaluate the PAR development process.

Treatment of Upper-Extremity Spasticity with Botulinum Toxin: Motor Control Evaluation to Determine Efficacy

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Project Number: H133G60161
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 96 $124,992; FY 97 $124,992; FY 98 $124,992

Abstract: This program is studying 30 subjects between the ages of 7 and 13 who have upper extremity spasticity that interferes with functional tasks. The subjects are evaluated for tone, range of motion, strength, and ability to perform standardized tasks. They then undergo a series of motor control tests, in which they are asked to perform simple tasks with their upper extremities. Movement parameters such as reaction time, speed, bilateral synchronization, and peak angular velocities are assessed. Electromyography measurements examine patterns of muscle activity during movements, which can be compared to normal patterns. The subjects undergo a series of testing over six months, the upper limit of expected efficacy of an injection of botulinum toxin. The hypothesis is that the subjects have an improvement toward a more normal pattern on all testing, which gradually decreases back toward baseline with time. Differences from baseline are analyzed with paired t-tests or paired rank sum tests. The duration of efficacy is measured using survival analysis techniques. Researchers examine the magnitude of effect of the injections to identify a subgroup that receives a maximum benefit from the treatment.

Quality of Life for Persons with a Spinal Cord Injury: A Qualitative and Quantitative Study

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Project Number: H133G50138
Start Date: October 1, 1995
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 95 $125,000; FY 96 $125,000; FY 97 $125,000; FY 98 (No-cost extension through 5/31/99)

Abstract: This project: (1) describes the quality of life (QOL) of people with spinal cord injury (SCI) in sufficient detail to understand the connectedness of (changing) standards, accomplishments, and their evaluation by various subgroups of this population; and (2) develops various versions of the SCI-QLI (Quality of Life Index) for people with SCI. Qualitative research methods, including unstructured interviews, are used to develop a list of significant life domains. Two phases of quantitative data collection are used to determine reliability and validity of the SCI-QLI, based on data supplied by various samples of people with SCI. Final versions of the instruments (clinical and research) are disseminated in booklet form.

Community Reintegration and Quality of Life Following Traumatic Brain Injury

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Project Number: H133G80076
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $125,000

Abstract: This project increases understanding of community reintegration (CI) and quality of life for people with traumatic brain injury (TBI), and develops instruments that can be used in future research. CI refers to a return to the mainstream of community life, and again becoming an active and contributing member of one's family and society. When people with TBI, their families, and professionals in rehabilitation discuss quality of life following TBI, they consider home and community roles and activities, rather than the impairments or disabilities resulting from the injury. The best currently available instrument, the Community Integration Questionnaire (CIQ) has serious limitations regarding the measurement of all aspects of CI in a comprehensive, reliable, and sensitive manner. This project: (1) produces a new version of the CIQ, and assesses its validity and reliability; (2) develops norms for the new CIQ, for subgroups defined by age, gender, and racial/ethnic group; (3) creates a life-satisfaction measure specific to people with TBI, and assesses its validity and reliability; (4) investigates the relationship between CI and subjective well-being; (5) describes the CI and quality of life of TBI survivors, with a focus on severity of injury, age, gender, socioeconomic status, and racial and ethnic group differences; and (6) disseminates the instruments and other results to people with TBI and their families, professionals, policy makers, and researchers.

The Impact of Managed Care on Rehabilitation Services and Outcomes for Persons with Spinal Cord Injury

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Project Number: H133G80073
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $123,963

Abstract: This project examines the impact of managed care on rehabilitation services and outcomes for people with SCI. The study analyzes demographic, medical, functional, community integration, life satisfaction, and service delivery data collected from Model Systems projects to determine how managed care is altering the acute and rehabilitative management of SCI and how it affects short- and long-term outcomes, such as functional status and community integration. Objectives include: (1) describing the pathways of newly injured people with SCI through the health care system, from injury to stable community residence: acute care, rehabilitation care (including inpatient-acute, subacute, day hospital and outpatient), home care, and readmissions for complications; (2) assessing the impact of managed care on these pathways: determining whether managed care patients differ from those with more traditional health insurance in terms of services received (providers, services, durations); and (3) assessing the effect of various pathways on the outcomes for this patient population at one and two years after injury in functional, medical, psychological, and health services utilization. The project team disseminates findings to consumers, managed care and other payer organizations, policy makers, and SCI professionals using a variety of mechanisms. Findings are expected to contribute to the redesign of the SCI Model Systems National Database to make it correspond optimally to the organization of health and rehabilitative services in the 21st century.

Effect of Motor Learning Procedures on Brain Reorganization in Subjects with Stroke

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Project Number: H133G80041
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $105,969

Abstract: This project determines whether elements of motor learning can promote brain reorganization and recovery of function in individuals with stroke. Two interventions have been shown to be effective in helping people recover from stroke, "forced use" of the weak side and electrical stimulation. Investigators have hypothesized that these treatments may unmask dormant motor centers or improve synaptic effectiveness, but no evidence has been forthcoming. The project involves two experiments: (1) subjects with stroke receive 20 training sessions at a finger movement tracking task in which they are forced to process the perceptual motor information mentally and learn to respond accurately, and (2) different subjects with stroke receive 20 days of electrical stimulation to the weak forearm muscles. For both experiments, changes in finger function are measured with tracking and manual dexterity tests. Neuroplastic changes in the brain are measured with functional magnetic resonance imaging. This project may show for the first time that physical rehabilitation procedures may stimulate beneficial reorganization of the brain following stroke and invite further experiments to optimize treatments.

Developing and Evaluating an Interactive Tool to Support Literacy Learning in Adolescents with Severe Speech and Physical Impairments

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Project Number: H133G80055
Start Date: September 1, 1998
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 98 $124,755
Abstract: This project creates a Web-based tool, the Adolescent Literacy Learning Link (ALL-Link), that provides adolescents with Severe Speech and Physical Impairments (SSPI) with an innovative learning environment. ALL-Link features age-appropriate reading and writing activities that are theoretically grounded in inclusive models of comprehension and composition that apply equally to people with and without disabilities. Projected outcomes of ALL-Link development include: (1) successful development and implementation of an innovative and interactive literacy-learning Web site for adolescents with SSPI and their teachers; (2) wide dissemination of the site, and parallel or related materials for classrooms without Internet access; and (3) project management that efficiently provides target groups with increased access to and use of the Web site, related materials, and project findings.

Creating Permanent Behavioral Health Access for Rural Missourians with TBI: Teleconferencing Application for Improved Services

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Project Number: H133G80033
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $104,462

Abstract: This project offers one-on-one training of community mental health providers via teleconferencing sessions, and uses information learned from these sessions to create specialized training manuals, brochures, and workshops that synthesize issues regarding TBI behavioral health. Community re-entry after traumatic brain injury (TBI) carries a host of physical, emotional, social, and vocational challenges for patients and families. In response to these challenges, behavioral health care is a central component in the rehabilitation process. Rural residents with TBI receive behavioral health services while in acute rehabilitation programs, but often are unable to access follow-up services in their local rural communities due to lack of coordination among inpatient and outpatient service providers. A permanent service structure of providers with competency in TBI adjustment and rehabilitation is desperately needed in rural areas. Services offered through this project are integrated among the adult inpatient rehabilitation, the post-rehabilitation recovery, and the extended outpatient adaptation and community reintegration periods of TBI adjustment. The project offers the educational tools to all rural mental health providers across the state, and a permanent rural TBI behavioral health service structure is instituted.

Hippocampal Dysfunction Following TBI: A Functional and Volumetric MRI Study of Memory Loss and Recovery

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Project Number: H133G70031
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $125,000; FY 98 $124,995
Abstract: For patients and their caregivers, one of the most prominent and disabling of the numerous traumatic brain injury (TBI) sequelae is loss of memory; abnormalities of hippocampal function and structure underlie these memory deficits and mechanisms of loss and recovery. This project: (1) tests the hypothesis that an abnormal activation in the hippocampal formation (HF) and temporal neocortex serves as the central neural substrate of disordered anterograde memory shortly after TBI, (2) relates recovery of memory functioning to normalization of temporal-hippocampal activation pattern 12 months after TBI, and (3) characterizes the relationship between abnormalities in hippocampal function as measured by functional MRI and changes in hippocampal volume.

Functional, Physiologic, and Immunologic Outcomes of Quantitative Progressive Exercise Rehabilitation of the Lower Extremities in Juvenile Arthritis: A Pilot Study

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Project Number: H133G70156
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $124,994; FY 98 $124,999
Abstract: This project determines the effects of muscle exercise rehabilitation on Juvenile Arthritis (JA) using quantitative measurement of functional, physiological, immunological, and biochemical outcomes of Quantitative Progressive Exercise Rehabilitation (QPER). JA is the most common of the rheumatic diseases affecting children; the disability that may result from this disease has a greater impact on lifestyle and quality of life in children than adults due to its early onset. Approximately 25 percent of all children with JA develop contractures and deformity, with 10 percent experiencing significant functional disabilities into adulthood. The goals of this project: (1) to determine the differences affecting the lower joints, between normal children and those with JA, with respect to their functional, physiologic, biochemical, and immunologic responses to exercise; (2) to evaluate the efficacy and effects of a previously published muscle exercise program developed in the laboratory, QPER with JA; (3) to investigate the biochemical and immunologic changes occurring as a result of exercise testing and the QPER program. Assessment of the impact on disease activity, symptoms, and a variety of functional outcome parameters is planned following completion of the program and 12 months later.

Detecting Incipient Skin Breakdown for People with Deeply Pigmented Skin

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Project Number: H133G50018
Start Date: October 1, 1995
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 95 $112,349; FY 96 $117,581; FY 97 $117,000; FY 98 (No-cost extension to 11/30/98)

Abstract: This study's objective is to develop techniques and instrumentation that permit early detection of skin trauma in darkly pigmented skin. People at risk for pressure sores regularly check for skin redness as a standard method to detect tissue distress. If persistent skin redness is detected, and its cause is removed, tissue breakdown can be prevented. However, for people with darkly pigmented skin at risk for tissue breakdown, this warning sign is attenuated or even completely shielded from view by melanin in the epidermis. With no effective alternative warning sign available, pressure damage in subjects with darkly pigmented skin is likely to be detected when it is more advanced and less reversible. Tasks include developing a valid analytical method of measuring erythema, and designing a simplified, portable spectrometer prototype that can be used to monitor skin clinically.

Communication of Preschool Males with Fragile X Syndrome: Profiles, Environmental Influences, and Intervention Strategies

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Project Number: H133G60186
Start Date: August 1, 1996
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 96 $116,211; FY 97 $116,984; FY 98 $116,211

Abstract: This project examines the development of the communication skills of 50 preschool males with fragile X syndrome, to understand development better and to elucidate appropriate approaches for early intervention services. The children's communication skills are measured annually, and families and early interventionists serving the study's children are interviewed annually. A survey of early childhood educators who work with children with fragile X syndrome is also conducted. Data is used to: (1) characterize developmental patterns in the acquisition of speech (i.e., phonology) and language (i.e., grammar, semantics, and pragmatics) during the preschool years; (2) identify which factors within the child (e.g., intellectual level, history of ear infections, joint attention, autistic symptomatology) and the environment (e.g., linguistic characteristics, parental interaction style) contribute to the development of communication skills; and (3) suggest early intervention strategies based on the identified patterns of development that promote the communication development of males with fragile X syndrome.

Pressure Ulcer Prevention by Interactive Learning (P.U.P.I.L.)

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Project Number: H133G50067
Start Date: July 1, 1995
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 95 $124,839; FY 96 $124,839; FY 97 $124,839; FY 98 (No-cost extension through 12/31/98)
Other funding: FY 95 $31,000 (Source: MetroHealth Center for Rehabilitation)
Abstract: This project assembles a set of materials for teaching pressure ulcer prevention. It uses text, diagrams, animations, sound, and video, links existing material where possible with new resources where necessary, and converts the materials to digital format. Teaching programs are then written to provide access through a personal computer in a variety of interactive sequences. These sequences are customized, not only during design but also by interaction during use, for users with different learning abilities and requirements. The initial target group is people with disabilities at risk of developing pressure ulcers. However, the technology is well suited for customization for other uses, such as training for nurses and other health professionals. The project plans to make the materials available to larger audiences and is producing a CD-ROM containing a set of teaching programs for institutions to train people with disabilities on how to prevent pressure ulcers. The project expects to distribute the CD-ROM nationally and to make selected portions available on computer networks.

The Physiologic Basis of Functional Electrical Stimulation on Muscle Atrophy in Acute Spinal Cord Injury

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Project Number: H133G80100
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $125,000

Abstract: This study characterizes the changes in muscle mass, morphology, and histochemistry in the first 6-7 months following acute spinal cord injury (SCI) and explores the impact of early reinstitution of muscle contraction on prevention of musculoskeletal atrophy. Muscle contractions are accomplished through the application of functional electrical stimulation (FES) induced cycle ergometry, but this study is not designed to develop FES technology. Rather it leads to a better understanding of the effect of FES-induced isotonic muscle contraction with dynamic force on the musculoskeletal changes known to occur after acute SCI. It also defines the dose-response relationship of FES-induced workloads on muscle mass and quality. Finally, the study begins to explore the mechanisms for the observed changes through characterization of both systemic growth hormone and insulin-like growth factors and local insulin like growth factor changes over the six-month FES cycle ergometry training program. A better understanding of the factors associated with the development of musculoskeletal atrophy occurring after acute spinal cord injury should lead to the development of better rehabilitation and pharmacologic interventions directed at preventing these secondary impairments of SCI.

Assessing the Impact of Managed Care on Rehabilitation Research

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Project Number: H133G70078
Start Date: May 1, 1997
Length: 24 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $102,585; FY 98 $101,736

Abstract: Little empirical data is available to document the extent to which research capacity in rehabilitation fields has been affected by managed care. This project gathers data used to assess managed care's impact on rehabilitation research capacity. Research findings are translated into recommendations for providing "substitute" support to sustain a research program that allows for optimal recovery from disabling illness and injury, and full participation of people with disabilities in all aspects of life.

A Non-Contact Wound Measurement System

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Project Number: H133G70103
Start Date: May 15, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: This project develops and clinically validates a non-contacting wound assessment technology. Clinical assessment of the healing status of wounds, particularly chronic wounds, is a laborious task that is often qualitative rather than quantitative. The new assessment is expected to measure wound surface area and volume and assess the status of the wound healing process by measuring the size of the granulation tissue border in the wound and by determining the percentage of the wound area that is red, yellow, or black. This information could be of value in assessing the efficacy of treatments and tracking the progress of a wound that is healing. The study involves designing and building a digital camera-based prototype measurement system that makes quantitative wound assessments without touching the wound. When the system is built, its accuracy is verified using models that represent wounds. After the accuracy of the system is established, a series of wounds is evaluated by different caregivers to assess the sensitivity of the system and its reproducibility.

Field-Initiated Projects (FIPs)
Virginia

Informed Prescription of Stimulant Drugs for ADHD: An Innovative Computer-Based Training Program

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Project Number: H133G50148
Start Date: July 1, 1995
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 95 $124,058; FY 96 $124,058; FY 97 $124,252; FY 98 (No-cost extension through 6/30/99)

Abstract: Estimates suggest that more than three million children are affected with attention deficit/hyperactivity disorder (ADHD) and its related disturbances in school performance and social relationships. In determining the efficacy of a stimulant as an adjunct to treatment, single-subject, double-blind placebo, crossover studies can provide objective information. Yet, physicians have been reluctant to implement such trials because of perceived complexity, time constraints, and difficulties in analyzing and interpreting behavioral outcome data. This project overcomes these barriers by developing and field testing a new, simplified protocol for conducting such individualized trials of medication, such as Ritalin, in primary care settings. Components of the protocol include: (1) computer-accessible background material on ADHD for parents and professionals; (2) detailed instruction packets for parents, pharmacists, teachers, and physicians; and (3) an innovative computer data management system providing a clear summary of results in a format that facilitates decision making. Following field testing among physicians in practice and in training, the protocol (computer software) is disseminated nationally.

Technology for Access and Function

Historically and currently, research investigating rehabilitation and biomedical engineering and assistive technology has produced results which have helped people with disabilities to achieve and maintain maximum physical function, live in their own homes, attain gainful employment, and participate in and contribute to society. NIDRR's research addresses a broad range of technology, including systems of public technology, such as telecommunications and the built environment and orphan technology for individuals. The research program also encourages universal design practices.

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Applications of Technology to the Rehabilitation of Children with Orthopedic Disabilities

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Project Number: H133E50006
Start Date: November 1, 1995
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $500,000
Abstract: This RERC works to improve the rehabilitation of children with orthopedic disabilities through several research and development projects: body-powered hands for young children with below-elbow amputations; an improved mobile arm support for children with flaccid paralysis of the shoulder and elbow flexor muscles; and orthotic design innovations to overcome the inherent difficulties in bracing children with myelomeningocele that have wide application to children with spinal cord injury, muscular dystrophy, Guillain-Barre syndrome, and other diseases resulting in paresis or paralysis of the lower extremities. In addition, the project solicits input from children and family members about attitudes toward prosthetic and orthotic equipment, current systems of service delivery, and the cultural, ethnic, and socioeconomic factors that affect acceptance and use of assistive devices. The project conducts most research and development activities at Rancho Los Amigos Medical Center, with additional projects conducted at Shriner's Hospital in Los Angeles and Claremont Graduate School in Claremont California.

Smith-Kettlewell Rehabilitation Engineering Research Center

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Project Number: H133E50001
Start Date: June 1, 1995
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 95 $600,000; FY 96 $600,000; FY 97 $600,000; FY 98 $600,000
Abstract: This RERC develops and evaluates new technology and methods for infant vision screening, orientation and navigation, described video, access to products, displays and electronic information, deaf-blind communication, and other problems faced by people who are blind, have visual impairments, or have multisensory loss.

Rehabilitation Robotics to Enhance the Functioning of Individuals with Disabilities

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Project Number: H133E30013
Start Date: June 1, 1993
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 93 $699,976; FY 94 $699,742; FY 95 $774,730; FY 96 $699,652; FY 97 $699,652; FY 98 (No-cost extension through 5/31/99)
Abstract: This project focuses on interfaces, design and application, and motor control of rehabilitation robotics, as well as related information and dissemination. Within its research focus, the RERC conducts many interdisciplinary research and information projects. Research and information activities are constituent-oriented and include implementation of a Consumer Innovation Laboratory. This lab includes consumers in the engineering design and fabrication of robotic devices to aid people with disabilities.

Rehabilitation Engineering Research Center on Universal Telecommunications Access

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Project Number: H133E50002
Start Date: September 1, 1995
Length: 48 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $500,000
Abstract: This RERC conducts research and engineering activities with the overall goal of improving the accessibility of emerging telecommunications systems and products. The Center moves forward the available telecommunications knowledge base for access issues confronting people with all types of disabilities. The program areas of the RERC are: (1) systems engineering analyses; (2) telecommunications access research, focusing on needs assessment and development of design solutions; (3) universal design specification and review, aimed at developers of products and services; (4) telecommunications standards that include accessible features; (5) telecommunications applications for increased independence; and (6) knowledge utilization and dissemination. The RERC combines expertise from Gallaudet University, the Trace Research and Development Center at the University of Wisconsin, and the World Institute on Disability (WID) with the expertise of the telecommunications industry through the active involvement of two noted telecommunications consultants, Richard P. Brandt and Robert Mercer.

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Rehabilitation Engineering Research Center on Telerehabilitation

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Project Number: H133E980025
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $890,000
Abstract: This project experiments with various models of telerehabilitation for strategic populations, engages in development activities that exploit promising technologies, and focuses on all aspects of the human-technology interface in a broad range of activities that benefit people with disabilities. Structured to include national resources with a strong focus on outreach and dissemination activities and a broad-based set of research activities, the Center focuses on: (1) Tele-homecare: telesupport for stroke caregivers; (2) Telecoaching: enhancing job options; (3) Telemonitoring: passive sensing of functional performance and health parameters at home using unobtrusive instrumentation; (4) Teleassessment: remote evaluation of skin health and decubiti for people with SCI at rural hospitals and clinics using innovative technologies; (5) Telerehab Consumer Toolkit: outreach and development activities and products; (6) Home Telerehab: interactive systems for remote delivery of therapy, assessment, teaching and demonstration at home; (7) Telecounseling and Teleevaluation: remote psychological counseling and neuropsychological evaluation at rural clinics and homes; (8) Behavioral Virtual Reality: investigation and training of social and attending behaviors using virtual environment technology; (9) Teleplay: therapeutic play, including embedded teleassessment for children with disabilities; (10) Integrating Telerehabilitation in Today's Health Care Marketplace. The Center also establishes National Resources activities: (1) Homecare and Telerehabilitation Technology Center; (2) Homecare and Telerehab Education/Training Center; (3) Virtual Library and Dissemination Center; (4) Standards, Codes and Electronic Patient Records (EPR); (5) Telerehab Policy Information Center. The Center comprises three institutions: The Catholic University of America (CUA), the National Rehabilitation Hospital (NRH); and the Sister Kenny Institute (SKI).

Rehabilitation Engineering Research Center in Prosthetics and Orthotics

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Project Number: H133E980023
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000
Abstract: This Center designs improved prosthesis and orthosis components or systems using knowledge from research and engineering areas. Research activities include: (1) studying several issues of human walking; (2) creating a three-dimensional instrument, based on the Direct Ultrasound Ranging System, that is able to provide estimates of walking efficiencies and quality of walking, and that provides clinicians with many parameters in a simple way; (3) delivering data-gathering instruments and a validated prototype database for collection, storage, and processing short- and long-term information concerning outcomes of prosthetic and orthotic (P&O) fittings; (4) creating a prototype computer-based system to select the most appropriate P&O device for specific individuals; (5) developing a computer-based visualization aid that allows display of a person and their proposed prosthetic arms before the limbs are fabricated to assist with decision-making and fitting; (6) performing a number of "proof-of-concept" investigations and advancing the design of several P&O components and systems to technology transfer and utilization stages; (7) maintaining a high international profile, through a newsletter and through participation in the development of international standards in P&O; (8) providing educational and research opportunities for engineers, practitioners, and scientists in P&O; (9) creating an advisory board that assists with research and development efforts and with the organization of the State-of-the-Science P&O conference. Information is disseminated through a Web site, the *Capabilities* newsletters, presentations, and journal articles.

Rehabilitation Engineering Research Center: Improved Technology Access for Land Mine Survivors

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Project Number: H133E980031
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $850,000

Abstract: This RERC is active in research, development, and demonstration; consumer surveys; education and training; utilization activities; technical assistance; and dissemination relating to improved technology access for land mine survivors. To accomplish these activities, the project: (1) maintains a consumer database and assessments of current prosthetic technologies; (2) develops or adapts technical advances in the design, production, and delivery of appropriate assistive devices; (3) designs and disseminates education, training, utilization, and outcome programs; (4) acts as a clearinghouse, providing researchers, educators, administrators, and funders access to resources that have been developed to facilitate service delivery to amputees in the United States and other countries; (5) disseminates information through an international newsletter and international journals, telecommunications, presentations at international meetings, training programs, consultations, open discussions, and other types of communication; and (6) develops and disseminates specific programs and products that address the needs of amputees and service providers in low-income countries where the vast majority of land mine survivors live (technical assistance is through the International Rehabilitation Network). The RERC also establishes an Advisory Council that includes consumers and practitioners.

Rehabilitation Engineering Research Center for Ergonomic Solutions for Employment

University of Michigan
Center for Ergonomics
1205 Beal Avenue
Ann Arbor, MI 48109-1217
tja@umich.edu
http://www.engine.umich.edu/dep/ioe/RERC/RERC.html

Principal Investigator: Thomas J. Armstrong, PhD
Public Contact: 734/763-3742; Fax: 734/764-3451

Project Number: H133E980007
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $800,000
Abstract: This Center combines ergonomic interventions, work and worksite modifications, assistive technologies, and medical interventions to facilitate placement of workers with disabilities, and helps prevent development of subsequent musculoskeletal illnesses and injuries. The Model System establishes a database to include information on a broad range of interventions and case examples as well as procedures for assessing workers, analyzing jobs, identifying accommodation needs and selecting interventions including ergonomic technologies. The comprehensive approach involving rehabilitation medicine and ergonomics culminates in a Web-based Model System that can be used by rehabilitation professionals, employers, consumers and organizations.

Rehabilitation Engineering Research Center on Assistive Technology for Older Persons with Disabilities

State University of New York (SUNY)/Buffalo
Center for Assistive Technology
515 Kimball Tower
Buffalo, NY 14214
wmann@acsu.buffalo.edu
http://wings.buffalo.edu/ot/cat/rerca.htm

Principal Investigator: William C. Mann, PhD
Public Contact: Jennifer B. Weir, Information Coordinator, 800/628-2281 (V/TTY); Fax: 716/829-3217

Project Number: H133E60006
Start Date: September 1, 1996
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $500,000; FY 97 $500,000; FY 98 $500,000
Abstract: Activities of the RERC focus on research, assistive device development, education, and information relating to assistive technology for older people in the home and beyond the home. The projects of the RERC fall into four major areas: (1) research: ten projects address assessments in the home and community, issues for minority elders, highly problematic device categories, clinical trials of effectiveness, and managed care work issues; (2) device development: six projects address automobiles, obesity, mobility, balance, stairs, and public seating; (3) education: four projects address professional students, graduate students, and rehabilitation and aging service professionals; and (4) information: ten projects include a "Helpful Products" series of videos and booklets, training manuals, resources for hotel and motel guests, product information, national conferences, newsletter inserts, a World Wide Web site, monograph series, resource sourcebook, and a resource phone line.

Rehabilitation Engineering Research Center on Technology Transfer

Center for Assistive Technology
State University of New York (SUNY)
515 Kimball Tower
Buffalo, NY 14214
joelane@acsu.buffalo.edu
http://wings.buffalo.edu/ot/cat/research.htm

Principal Investigator: Joseph Lane, MBPA
Public Contact: James Leahy, 716/829-3141 (V); 800/628-2281 (TTY); Fax: 716/829-3217

Project Number: H133E980024
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000

Abstract: This Center improves the quality of life for people with disabilities by: advancing the methods of technology transfer through research, transferring technologies into products through development, and facilitating the commercialization of new and improved assistive devices. These three outcomes are accomplished through collaborations with academic, industrial, consumer and government stakeholders. The Center, a partnership of technical, marketing, and consumer expertise and networks: (1) conducts research on the technology transfer process as it is applied to the field of assistive technology, and develops, validates, and disseminates comprehensive models of technology transfer; (2) applies the research results by implementing the technology transfer process through a development program; (3) identifies and transfers breakthrough technologies to industry through a demand-pull model, transferring at least three technologies annually; (4) identifies and transfers useful new inventions to the marketplace through a supply-pull model, transferring three to five products annually; (5) delivers training, dissemination and technical assistance programs to stakeholders in the field; (6) is developing an online technology transfer course as part of the University at Buffalo's distance education initiative. The dissemination program includes a state-of-the-practice conference and the development of a technology transfer program to be offered for presentation in year three. The Center functions as an intermediary and a catalyst, improving the process while expanding the network of stakeholders involved with the field. The end result: new and improved assistive technology products available in the marketplace that benefits professional service providers, family members, and people with disabilities.

Rehabilitation Engineering Research Center on Hearing Enhancement and Assistive Devices

The Lexington Scool for the Deaf/Center for the Deaf
Research Division
30th Avenue and 75th Street
Jackson Heights, NY 11370
info@hearingresearch.org
http://www.hearingresearch.org

Principal Investigator: Harry Levitt, PhD; Matt Bakke, PhD, 718/899-8800, ext. 230
Public Contact: Matt Bakke, PhD, 718/899-8800, ext. 230 (V/TTY); Fax: 718/899-3433

Project Number: H133E980010
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $900,000

Abstract: This RERC develops and evaluates technology to accommodate the needs of people with hearing loss, and disseminates related information in a form that is understandable to consumers, service providers, employers, and community leaders. These goals are accomplished by: (1) developing and evaluating improved, cost-effective technological aids for each of the target populations identified; (2) developing and evaluating instrumentation for detecting hearing loss at an early age; (3) providing improved access to modern telecommunications; (4) developing and evaluating specialized technology for community, home, and work environments; and (5) pursuing an active program of dissemination and training to ensure effective utilization of assistive technology.

Rehabilitation Engineering Research Center on Communication Enhancement in the New Millennium

Duke University
Department of Surgery
Division of Speech Pathology and Audiology
Duke University Medical Center, Box 3888
Durham, NC 27710
http://aac-rerc.com

Principal Investigator: Frank DeRuyter, PhD
Public Contact: 919/681-9983; Fax: 919/681-9984

Project Number: H133E980026
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $899,996

Abstract: This project uses innovative communications technologies to benefit researchers, engineers, rehabilitation service providers, developers, and users of AAC technologies. The project: (1) investigates attitudinal barriers toward technology use by elderly people with communication disorders, their listeners, and service providers; (2) studies the organizational strategies of adult AAC users to determine if preferences are predictive of performance using AAC; (3) studies how to improve AAC technologies for young children with significant communication disorders by evaluating learning demands and functional performance (also involves development of design specifications); (4) evaluates and enhances communication rate efficiency and effectiveness through the development of procedures and software technology that simulates and measures the performance of AAC technologies; (5) identifies barriers to employment, describes strategies to overcome them, documents design specifications for AAC technologies, and describes action plans to achieve successful employment outcomes; (6) increases employment opportunities for graduates of an employment and AAC program; and (7) develops a coordinated program that monitors and seeks out technology developments in both commercial form and prerelease development stages that affect the engineering and clinical AAC field.

Rehabilitation Engineering Research Center on Accessible and Universal Design in Housing

North Carolina State University School of Design
Center for Universal Design
219 Oberlin Road
Box 8613
Raleigh, NC 27695-8613
cud@ncsu.edu
http://www.design.ncsu.edu/cud

Principal Investigator: Lawrence H. Trachtman
Public Contact: Lawrence H. Trachtman, 800/647-6777 (V/TTY, information requests only); 919/515-3082 (V/TTY); Fax: 919/515-3023

Project Number: H133E40003
Start Date: July 1, 1994
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 94 $585,157; FY 95 $515,087; FY 96 $515,087; FY 97 $515,087; FY 98 $515,087
Abstract: This RERC's mission is to: (1) conduct research in documenting problems in housing for people with disabilities; (2) identify or generate and test solutions to documented problems; (3) demonstrate the general utility of solutions to documented problems; and (4) conduct training to address skill acquisition, knowledge diffusion, and general awareness of issues related to housing for people with disabilities. The Center also provides information and referral services to address identified needs through development and dissemination of publications and other information materials and referral to other organizations and agencies who can assist with specific information requests. The Center's audience includes designers, contractors, developers, financial providers, consumer advocates, and users of residential environments.

Rehabilitation Engineering Research Center for Quantification of Physical Performance

Ohio State University
Orthopaedics
2050 Kenny Road
Columbus, OH 43221-3502
flanagan.6@osu.edu
http://www.ortho.ohio-state.edu/RERC/RERC.html

Principal Investigator: Sheldon R. Simon, MD
Public Contact: Lynn Flanagan, 614/293-3876

Project Number: H133E30009
Start Date: July 1, 1993
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 93 $699,128; FY 94 $699,461; FY 95 $700,000; FY 96 $700,000; FY 97 $700,000; FY 98 (No-cost extension through 6/30/99)
Abstract: This project improves direct evaluation of the merits and deficiencies of different modes of therapeutic intervention by researching development and evaluation of methods and instrumentation that quantify measurable aspects of the patient's prior and post-therapeutic condition. The project's five areas of concentration are: (1) developing, improving, and refining instrumentation to assess human functional performance where it is necessary; (2) developing and establishing a mechanism by which a data registry can be established for a variety of diseases affecting function; (3) developing computer models to assist in this understanding; (4) developing computer techniques to understand and teach methods of analysis in objective ways; and (5) developing a system of technical and engineering information exchange.

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Rehabilitation Engineering Research Center on Wheeled Mobility

University of Pittsburgh
Rehabilitation Technology Program (RTP)
Forbes Tower, Suite 5044
Pittsburgh, PA 15260
dhobson@pitt.edu
http://128.147.90.92/rtp/RERCHP.html

Principal Investigator: Douglas A. Hobson, PhD; Clifford Brubaker, PhD
Public Contact: 412/647-1273 (V); 412/647-1291 (TTY); Fax: 412/647-1277

Project Number: H133E990001
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000
Abstract: The RERC on Wheeled Mobility investigates the use of dynamic seating for reducing spasicity, and enhancing seating comfort; investigates the biomechanical characteristics of soft tissue related to the risk of developing pressure ulcers, and the relationship between pressure measurements and pressure ulcer incidence; develops and validates the use of outcomes measures for seating and mobility intervention; and investigates the use of the World Wide Web as a seating decision support tool for consumers. This project also develops and evaluates a comparative data source for use in decision support of wheelchair selection; an interface for integrating external devices with powered wheelchairs; wheelchair seating standards; standardized postural measures; injury prevention wheelchair technologies; and enhanched controls for powered wheelchairs.

Vermont Rehabilitation Engineering Research Center for Low Back Pain

University of Vermont
Vermont Back Research Center
One South Prospect Street
Burlington, VT 05401
backtalk@salus.med.uvm.edu
http://salus.med.uvm.edu/~backtalk

Principal Investigator: Martin H. Krag, MD
Public Contact: 800/527-7320 (V/TTY); 802/656-4582 (V/TTY); Fax: 802/660-9243

Project Number: H133E30014
Start Date: August 1, 1993
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 93 $700,000; FY 94 $700,000; FY 95 $700,000; FY 96 $700,000; FY 97 $700,000; FY 98 (No-cost extension through 6/30/99)
Abstract: The Vermont RERC improves the employability of people with back disorders and back disability by developing and testing assistive technology. Engineering projects include studies of lifting, posture, seating, vibration, and materials handling in connection with back pain and disability. Applied research projects include the testing of rehabilitation engineering products, evaluation of exercise programs, and the development of a statewide model program to hasten return to work of people with back injuries. The Center's Information Services Division provides toll-free assistance in locating research and rehabilitation programs, as well as bibliographic searching and fact finding. The Center also maintains an Electronic Discussion Group: BACKS-L (subscription requests should be sent to listproc@list.uvm.edu with the body of message subscribe backs-l *your name*).

Rehabilitation Engineering Research Center on Information Technology Access

University of Wisconsin/Madison
Trace Research and Development Center
5901 Research Park Boulevard
Madison, WI 53719-1252
info@trace.wisc.edu
http://trace.wisc.edu

Principal Investigator: Gregg C. Vanderheiden, PhD, 608/262-6966
Public Contact: Rachael Bower, Information Outreach Coordinator, 608/263-6966 (V); 608/263-5408 (TTY); Fax: 608/262-8848

Project Number: H133E980008
Start Date: June 12, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $1,350,000

Abstract: This RERC improves access by individuals with all types, degrees, and combinations of disabilities to a wide range of technologies, including computers, ATMs, kiosks, point-of-sale devices and smartcards, home and pocket information appliances, Internet technologies (XML, XSL, CSS, SMIL, etc.), intranets, and 3-D and immersive environments. As one component in a larger system of consumers, researchers, industry, and policy and public agencies, the Trace Center's program is designed to work within the existing structure, supporting other components and coordinating its efforts to address the functioning of the whole. The program identifies strategies that can be used by industry to broaden the user base for their standard products, so individuals with as broad a range of abilities as possible are able to use standard products directly. Further, the Center targets specific compatibility and interconnection standards work to ensure that people who cannot use products directly are able to operate them using assistive technologies. The Center focuses on the use of targeted projects and collaboration, both national and international, to carry out the research, development, information dissemination, training, and standard-setting activities required. The approach is intended to be flexible, forward-looking, and broad in scope, yet focused on key access issues as defined by its consumer constituency and its research programs.

Understanding and Increasing the Adoption of Universal Design in Product Design

University of Wisconsin/Madison
Trace Research and Development Center
5901 Research Park Boulevard
Madison, WI 53719-1252
info@trace.wisc.edu
http://www.tracecenter.org

Principal Investigator: Gregg C. Vanderheiden, PhD
Public Contact: Rachael Bower, Information Outreach Coordinator, 608/262-6966; Fax: 608/262-8848

Project Number: H133A60030
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 96 $250,000; FY 97 $250,000; FY 98 $250,000

Abstract: This project identifies the factors that cause industry to practice, or not to practice, universal design of products; and identifies ways that people outside companies can encourage and facilitate the practice of universal design of products on a more widespread basis. The project brings together experts who have been active in universal design from across the technology spectrum to work with industry in addressing these questions. Areas of expertise include housing and architecture, computers and electronic products, media and materials, telecommunications, and educational software.

Adaptive Parenting Equipment: Evaluation, Development, Dissemination, and Marketing

Through the Looking Glass
2198 Sixth Street, Suite 100
Berkeley, CA 94710-2204
thruglass@aol.com
http://www.lookingglass.org

Principal Investigator: Megan Kirshbaum, PhD, 510/848-1112, ext. 102
Public Contact: Anitra DeMoss, Project Director, 800/644-2666 (V); 800/804-1616 (TTY); 510/848-1112 (V); Fax: 510/848-4445

Project Number: H133G60036
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000
Abstract: Adaptive parenting equipment facilitates routine parenting tasks for parents with physical disabilities and its presence or absence can profoundly affect the parent-child relationship. Following a model of using a nonpathological approach to parenting with a physical disability from Through the Looking Glass, this study addresses the critical need for adaptive parenting equipment in four ways: (1) continuing to refine and develop adaptive parenting equipment and techniques that meet the needs of a wide variety of parents with physical disabilities; (2) investigating the impact of adaptive equipment on the parent-infant relationship; (3) training practitioners to assess parents' adaptive needs effectively and developing and implementing appropriate adaptive parenting equipment and techniques; and (4) assessing and implementing appropriate manufacturing, marketing, and distribution strategies for prototypes of adaptive parenting equipment that have been developed.

Powered Mobility and Young Children with Disabilities: A Multicenter Trial to Determine the Cognitive and Coping Factors That Predict Wheelchair Skill Level

Los Amigos Research and Education Institute, Inc. (LAREI)
Rancho Rehabilitation Engineering Program
7503 Bonita Street - Bonita Hall
Downey, CA 90242
donitatefft@ranchorep.org
http://www.ranchorep.org/pm

Principal Investigator: Donald McNeal, PhD
Public Contact: Mitzi Hyer, Administrative Assistant, 562/401-7994; Fax: 562/803-6117

Project Number: H133G60183
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 96 $124,958; FY 97 $124,973; FY 98 $124,958
Abstract: This project validates, in a multicenter trial, a newly developed cognitive assessment battery for predicting a young child's readiness for powered mobility. This is important because research in developmental psychology asserts that the ability to move about independently is critical to a child's development of cognitive, social, and communication skills. Young children who are unable to move independently are at risk for development delays. Due to limited availability of clinical assessment instruments, it is often difficult to determine when a young child with mobility impairments may be developmentally ready to operate a powered wheelchair. In addition, the project expands the predictive power of this assessment instrument by adding a component to assess coping skill (e.g., persistence, distractibility, etc.) and to explore the applicability of this battery with a new population of children (i.e., those with cerebral palsy).

Remote Signage Development to Address Current and Emerging Access Problems for Blind Individuals

Smith-Kettlewell Eye Research Institute
2232 Webster Street
San Francisco, CA 94115
bc@skivs.ski.org
http://www.ski.org

Principal Investigator: John A. Brabyn, PhD; William F. Crandall, PhD, 415/561-1658
Public Contact: 415/561-1657; Fax: 415/561-1610

Project Number: H133G60076
Start Date: June 15, 1996
Length: 36 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000

Abstract: This project is developing new, practical enhancements of remote signage technology to solve a range of specific current and emerging accessibility problems faced by people who are blind and who have other print-reading disabilities. For users who are blind, access to any place or facility begins with the problem of knowing it exists; then the problem of finding it must be addressed. Specific solutions are being developed for safe usage of light-controlled pedestrian crossings, identification and onboard announcements of stops for buses, identifying route number and destination of oncoming buses, locating and accessing automated teller machines and other vending information terminals, and access to signage by people with cognitive impairments. These innovative solutions are being developed from the infrared Talking Signs(R) system of remotely readable signs for people who are blind, which was developed by Smith-Kettlewell. This system is gaining acceptance as an aid to orientation and navigation for those who cannot read the print signage that fully sighted people take for granted in navigating and accessing the world.

Spatial Hearing with Laboratory-Based Hearing Aids

Smith-Kettlewell Eye Research Institute
2232 Webster Street
San Francisco, CA 94115
helen@skivs.ski.org
http://www.ski.org

Principal Investigator: Helen J. Simon, PhD
Public Contact: 415/561-0712; Fax: 415/561-1610

Project Number: H133G70107
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: Since conventional binaural hearing aids do not satisfactorily solve the problem of speech perception in noise, a long-term goal of the Smith-Kettlewell Eye Research Institute is to develop a better binaural hearing aid (HA). This project's hypothesis suggests that a binaural perceptual balance of Interaural Intensity Difference (IID) and Interaural Time Delay (ITD) across frequencies is required to restore optimum localization and speech intelligibility by eliminating or lessening exaggerated dominance consequent to asymmetric hearing loss. Aberrations of either or both IID and ITD at different frequencies would impair directional localization and, therefore, speech intelligibility in noise.

Development of a Rehabilitator for Arm Therapy After Brain Injury

Rehabilitation Institute Research Corporation
Sensory Motor Performance Program
345 East Superior Street
Chicago, IL 60611
dreinken@uci.edu
http://www.eng.uci.edu/~dreinken/djr.htm

Principal Investigator: David Reinkensmeyer, PhD
Public Contact: 949/824-5218; Fax: 949/824-8585

Project Number: H133G80052
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $124,117

Abstract: This project develops a self-therapy rehabilitator for the arm after hemiplegic stroke and other types of brain injury to correct the current lack of appropriate technology. The device, called the "Assisted Rehabilitation and Measurement (ARM) Guide," implements a common manual therapy technique, active assistance for reaching movements. In addition, the ARM Guide is designed to provide visual feedback of guidance forces to the user during assisted reaching. Dr. Reinkensmeyer can be reached at the Department of Mechanical and Aerospace Engineering, 4200 Engineering Gateway, University of California, Irvine, Irvine, CA 92697-3975.

Development and Commercial Transfer of a Tactile Image Printer (TIP)

International Braille Research Center
4424 Brookhaven Avenue
Louisville, KY 40220
tvc@iglou.com

Principal Investigator: T. V. Cranmer, PhD
Public Contact: 502/458-7157; Fax: 502/454-3374

Project Number: H133G80103
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $125,000

Abstract: The project designs a product that allows students, educators, and other professionals who are blind to access a variety of graphic material such as computer screens, maps, schematics, geometry tables, organizational charts, flow charts, and line drawings. Researchers develop a device that produces sharper, better-defined tactile images and includes lines and filled-in areas of varying dimensions and textures. Colors can also be produced as needed or as appropriate. Developers include the inventor, engineers, educators, publishers, and grassroots advocacy organizations, with support from three Rehabilitation Research Engineering Centers, those on Information Access (Trace), Blindness and Visual Impairment (Smith-Kettlewell), and Technology Transfer (SUNY/Buffalo). The device should help people who are blind or who have visual impairments to become active participants in the new global economy. Phases of the project include firmware development, experimentation and testing, creation and testing of graphic material, and product and information dissemination.

Closed Captioning and Audio Description: Development and Testing for Access to Digital Television

WGBH Educational Foundation
125 Western Avenue
Boston, MA 02134
ncam@wgbh.org
http://www.wgbh.org/ncam

Principal Investigator: Larry Goldberg
Public Contact: Gerry Field, 617/492-2777 ext. 3496; Fax: 617/782-2155

Project Number: H133G80050
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $125,000
Abstract: This project addresses the urgent, time-sensitive need to improve the effectiveness of Advanced Television (ATV) to deliver high-quality captioning and description services to people who are deaf, hard of hearing, who are blind, or who have visual impairments. Advanced Television (ATV) incorporates the technologies known as High-Definition Television (HDTV) and Standard Definition Television (SDTV), and is a complete redesign of North America's television service, featuring a digital signal, a sharper picture, an aspect ratio resembling that of a wide-screen movie, multiple CD-quality audio channels, and ancillary data services. This project uses knowledge and understanding gained from research and development previously undertaken by the WGBH Educational Foundation (among others) to design and develop prototype ATV captioning and description processes. Project objectives are: (1) to develop and disseminate a *standard* data file that tests ATV systems for quality and accuracy in handling ATV captions and descriptions as they are encoded, transmitted, and decoded in accordance with accepted standards and official *minimum requirements;* (2) to develop and disseminate an *advanced-features* data file that tests ATV systems for quality and accuracy in handling ATV captions and descriptions as they are encoded, transmitted, and decoded in accordance with accepted standards and with a full *range of advanced features;* (3) to evaluate the effectiveness of ATV receivers in decoding ATV captions and descriptions and to measure implementation of advanced features.

Speaking to Write: Realizing the Potential of Speech Recognition for Secondary Students with Disabilities

Education Development Center, Inc.
Family, School, and Community
55 Chapel Street
Newton, MA 02158-1060
patriciac@edc.org
http://www.edc.org/spk2wrt

Principal Investigator: Patricia Corley; Robert Follansbee
Public Contact: 617/969-7100, ext. 2449; Fax: 617/969-3440

Project Number: H133G70143
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 97 $124,995; FY 98 $125,000
Abstract: This project helps secondary students with cognitive and physical disabilities to become successful writers by using voice recognition technology. The project plans to develop, pilot, publish, and market the following set of products: (1) adaptations to voice recognition systems that make them more accessible to secondary students with physical or learning disabilities, (2) tools that help educators and parents understand the demands of voice recognition for secondary students with disabilities, (3) revised training protocols and materials that are tailored to the needs of secondary students with disabilities, and (4) tools that help educators integrate voice recognition technology into meaningful instructional activities. Project partners are the Education Development Center, Inc. (EDC), and the Communication Enhancement Center at Children's Hospital in Boston.

Direct Brain Interface for Control of Assistance Technology

University of Michigan
Physical Medicine and Rehabilitation
1500 East Medical Center Drive, Room 1C335
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silevine@umich.edu

Principal Investigator: Simon Levine
Public Contact: 734/936-7170; Fax: 734/936-7515

Project Number: H133G70120
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 97 $124,993; FY 98 $124,971

Abstract: Most assistive technology interfaces are operated by some form of physical movement; however, many people could benefit from an interface that does not require physical movement and instead accepts commands directly from the brain. This research explores the detection and use of event-related potentials (ERP's) intracranially recorded from subdural electrodes to demonstrate the feasibility of a direct brain interface for people with disabilities. In this study a direct brain interface is defined as an interface that accepts signals directly from the brain and requires no physical movement. Work in this project is limited to signals arising from voluntary cognitive activity as opposed to those evoked through external stimuli.

The Universal Bathroom

State University of New York (SUNY)/Buffalo Research Foundation
520 Lee Entrance, Suite 211
Amherst, NY 14228-2567
mullick@arch.buffalo.edu

Principal Investigator: Abir Mullick, Project Director
Public Contact: 716/829-3485, ext. 322; Fax: 716/829-3861

Project Number: H133G60203
Start Date: January 1, 1997
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 96 $124,786; FY 97 $124,786; FY 98 $124,786

Abstract: While the greatest potential benefactors of a universal bathroom are non-institutionalized people with disabilities who are living independently, the new bathroom's design is created to be safe, accessible, and usable by all people regardless of their age, sex, and disabling conditions. Its assumed modular, interchangeable components will include three primary units, for bathing/showering, toileting, and grooming. Since the bathroom of the user's choice can be custom built from a large range of component units, this will be a marketable, culturally responsive one with accepted layouts and levels of privacy. Additionally, the "lifespan perspective" of the bathroom's design will allow able-bodied care-providers such as parents of young children and those assisting older individuals to make layout changes and product alterations based on their current needs. Thus the bathroom's assistive qualities are designed to reduce temporary dependence on others and increase safety by preventing accidents that lead to disability. It will empower independent users, dependent users, and care-providers equally--the young, the old, married couples, people with children, and families with "live-in" grandparents.

A Direction Finding, Beam Forming (DF-BF) Conference Microphone System

The Lexington School for the Deaf/Center for the Deaf
Research Division
30th Avenue and 75th Street
Jackson Heights, NY 11370
bakke@hearingresearch.org
http://www.hearingresearch.org

Principal Investigator: Matthew H. Bakke
Public Contact: 718/899-8800; Fax: 718/899-3433

Project Number: H133G70122
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: This project develops and evaluates a conference microphone system that is intended to provide improved speech intelligibility in noisy and reverberant environments for people who are hard of hearing. The microphone system also improves the accuracy of computer-assisted speech transcription systems for people who are deaf. The system uses digital array processing techniques to perform two discrete functions: (1) determine talker direction within a given angular resolution, and (2) aim a superdirectional beam pattern at that talker. In instances where more than one person is speaking at the same time, the system has the ability to activate more than one directional pattern, or alternatively receive sound from all directions until one talker has taken the floor. Although this device is designed specifically for people who have hearing loss, it also offers advantages to the general population, particularly when used in teleconferencing.

Promoting the Practice of Universal Design

North Carolina State University School of Design
Center for Universal Design
219 Oberlin Road
Box 8613
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http://www.design.ncsu.edu/cud

Principal Investigator: Molly Story
Public Contact: 303/699-8133; Fax: 303/699-4703

Project Number: H133G80060
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $124,970

Abstract: This project promotes the practice of univeral design by developing and implementing a self-supporting product design evaluation and marketing program that responds to consumer and industry needs. Universal design is the design of products and environments that are usable, to the greatest extent possible, by everyone regardless of their age or ability. The critical next step toward increasing the practice of universal design is adoption and application of its principles both by consumers and by industry. The three objectives of this project are to improve consumers' ability to recognize universal design, to improve designers' ability to meet the needs of a diverse consumer base, and to recognize and support industry efforts to market universal design successfully. Ways these objectives are achieved through this project include: (1) developing a set of performance measures that reflect the Principles of Universal Design, (2) confirming the reliability of these measures and pilot testing the evaluation program, (3) developing a plan of self-support for the universal design evaluation program, and (4) disseminating the results to appropriate audiences. The project develops a sound universal design program based on information gathered directly from future users--consumers, designers, and marketers--as well as the universal design research community.

Further Development of a Lower Limb Prosthetic Socket CAD System Based on Ultrasound Measurement

Wright State University
Department of Biomedical and Human Factors Engineering
3640 Colonel Glenn Highway
Dayton, OH 45435
phe@cs.wright.edu
http://www.cs.wright.edu/bhe/research.html

Principal Investigator: Ping He, PhD
Public Contact: 937/775-5069; Fax: 937/775-5009

Project Number: H133G60110
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000

Abstract: This project has four objectives: (1) to improve the performance of an ultrasound-based computer-aided socket design (CASD) system developed by this research team; (2) to enhance the utility of the system by developing and testing new devices and procedures for limb measurements using the system; (3) to conduct a clinical trial to evaluate the usefulness of the ultrasound-based CASD system in improving daily prosthetic socket design/fitting; and (4) to investigate applications of ultrasound measurements in finite-element modeling for the study of limb-prosthesis interaction.

Accessibility of Personal Computers for Adults with Significant Cognitive Disabilities: Development and Field-Testing of Assistive Software for Personal Management

Eugene Research Institute
132 East Broadway, Suite 747
Eugene, OR 97401
tkeating@oregon.uoregon.edu
http://www.eugeneresearch.org

Principal Investigator: Thomas Keating, PhD
Public Contact: 541/342-3763; Fax: 541/342-4310

Project Number: H133G80095
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $124,983

Abstract: This project develops and field-tests a graphically driven software application to augment the ability of users with cognitive disabilities to schedule and manage personal activities. As conceived, the software can also serve as a cognitively accessible gateway for other functions, such as finding out about and scheduling community events, managing a personal budget, communicating and coordinating activities with friends, and performing household tasks. The application design is based on pilot work with adolescents and employs a graphic interface that guides users through the metacognitive choices implicit in detailing and scheduling activities. This involves deciding what activity to schedule when, who is doing it, how much money is needed, where it is happening, how to get there, what to bring, and what to wear. For each of these decisions, the user is presented with a grid of graphic representations, each of which is some combination of personalized photo image, symbol, text, and sound. By selecting from the images represented for each aspect of activity planning, the user constructs an entire activity and can print out and carry a personal daily schedule with detailed reminders. Approximately 50 adults with significant cognitive disabilities are involved with the project.

A Pilot Study for the Clinical Evaluation of Pressure-Relieving Seat Cushions for Elderly Stroke Patients

University of Pittsburgh
Forbes Tower, Suite 5044
Pittsburgh, PA 15260
dbrienza+@pitt.edu
http://pft5xx36.ft90.upmc.edu/RST/SSBL

Principal Investigator: David Brienza
Public Contact: 412/647-1275; Fax: 412/647-1277

Project Number: H133G70076
Start Date: July 1, 1997
Length: 24 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 97 $124,643; FY 98 $124,602
Abstract: This project designs and tests the feasibility of a randomized clinical trial to determine the efficacy of pressure-relieving seat cushions for immobile, elderly stroke patients. Older people with disabilities who are immobile and, thus, spend their time either in bed or seated, are at risk for developing pressure ulcers. Commercial seat cushions intended to reduce the risk of sitting-induced pressure ulcers are available, but the elderly population is not customarily evaluated for seating and positioning needs or provided with the benefits of this technology. Reimbursement is not available, due in part to the fact that the effectiveness of this intervention has not been sufficiently demonstrated for this high-risk population, and these services and technology are not available. If these cushions are a successful intervention for increased comfort, improved quality of life, and pressure ulcer incidence rate reduction, the project plans to disseminate the findings and provide justification for third party funding. If successful, the project plans to increase the availability of seating and positioning services and products to this deserving population.

The Mentor Project: Exemplary Practices for Developing Supportive Mentor-Protege Relationships via the Internet for People with Significant Physical and Speech Disabilities

Pennsylvania State University
Department of Communication Disorders
217 Moore Building
University Park, PA 16802
jcl4@psu.edu

Principal Investigator: Janice Light, PhD
Public Contact: 814/863-2010; Fax: 814/863-3759

Project Number: H133G80044
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 98 $124,806

Abstract: This project addresses two critical needs: it responds to the needs of people with a combination of significant physical and speech disabilities, including those who are members of traditionally under represented groups; and it investigates the use of teleconferencing technology to provide disability-related services. People with physical and speech disabilities confront significant barriers in their drive to maximize educational and vocational achievement, inclusion in society, self-sufficiency, and the overall quality of their lives. The project provides constituents with regular access to competent mentors with similar disabilities who can provide encouragement, collaborative problem-solving, and information about disability-related resources. These problems are particularly acute for adolescents and young adults, especially those who reside in rural areas or who are members of ethnic and racial minorities. Activities include: (1) investigating the effect of a leadership training program, delivered via the Internet, on the acquisition, generalization, and maintenance of problem-solving strategies and mentoring skills by 30 adults with physical and speech disabilities (using single-subject, multiple probe design); (2) investigating the effect of a mentor program, delivered via the Internet, on the acquisition, generalization and maintenance of problem-solving strategies by 30 adolescents and young adults who have physical and speech disabilities, as well as the effect on their successful attainment of individualized educational, vocational, social and personal goals (using a single-subject, multiple probe design and Goal Attainment Scaling); and (3) developing, evaluating, and disseminating resource materials documenting exemplary practices for the implementation and evaluation of effective mentoring programs to be used by people with disabilities, their families, and rehabilitation professionals. Consumers with disabilities are integrally involved in planning, implementation, evaluation, and dissemination activities of the project.

Access Solutions

Vermont Center for Independent Living
11 East State Street
Montpelier, VT 05602
hbjordan@together.net

Principal Investigator: Henrietta B. Jordan
Public Contact: 802/229-0501; Fax: 802/229-0503

Project Number: H133G60046
Start Date: August 15, 1996
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000
Abstract: This project develops, tests, and evaluates an innovative technology for building access ramps, and disseminates the findings to builders, ADA compliance experts, and consumers. The Vermont Center for Independent Living, in conjunction with Bike Track, Inc., is developing and testing a new system for building modular, reusable, and highly durable access ramps using a newly developed, non-toxic material made from recycled plastic. The ramp system's performance, material, and elements are field tested in a variety of settings and in a wide range of climatic conditions.

Novel Prosthetic Foot Design Method to Improve Metabolic Efficiency of BK Amputee Gait

University of Washington
Department of Rehabilitation Medicine
Box 356490
Seattle, WA 98195-6490
pricer@u.washington.edu

Principal Investigator: Justus F. Lehmann, MD
Public Contact: 206/543-6766; Fax: 206/685-3244

Project Number: H133G70038
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 97 $121,550; FY 98 $125,000

Abstract: This investigation examines the concept that to use a prosthesis optimally, energy must be stored and released over the proper time interval to meet kinetic requirements of gait. Despite recent improvements in the materials used to construct lower limb prostheses, further improvements in prosthetic foot design could result in increased function, endurance, improved vocational and recreational opportunities, and improved quality of life for people with below-knee amputations. The intent of this research is to test the hypothesis that the metabolic cost of ambulation is minimized in people with below knee amputations wearing energy restoring prostheses, when the driving frequency of oscillation (dictated by ambulation speed) matches the resonant frequency of the prosthesis (dictated by prosthesis stiffness and user mass). The hypothesis can be described another way: when the foot contact time on the ground (dictated by ambulation speed) matches the time period over which the prosthesis compresses and extends when it is allowed to do so in a natural or unrestrained fashion (i.e., at resonance), the energy cost is minimized. The long-term objectives of this study are to provide a rational basis for the design of energy-storing lower limb prostheses and to improve the function of people with lower limb amputations through increased metabolic efficiency of ambulation.

Feasibility of a Low-Cost Prosthetic Hand for Arm Amputees

Fillauer, Incorporated
2710 Amnicola Highway
Chattanooga, TN 37406
gstark@usit.net
http://www.hosmer.com

Principal Investigator: Gerald E. Stark
Public Contact: 800/251-3698; Fax: 423/624-1402

Project Number: ED-98-PO-3527
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $49,931
Abstract: This project creates a low-cost, endoskeletal, prosthetic hand and makes it available for purchase by upper limb amputees in the United States and other countries, including Bosnia, Cambodia, and Vietnam. Compared to current mechanical hands, the new hand is designed to have a lighter and cheaper build, a more appealing cosmetic appearance, and easier operation so users benefit functionally, aesthetically, and psychologically.

WebWise: A Specialized Web Browser Providing Independent Access to the Internet to Individuals with Mental Retardation

Ablelink Technologies
2501 North Chelton Rd
Colorado Springs, CO 80907
dan@assess.net

Principal Investigator: Daniel K. Davies
Public Contact: Steven E. Stock, 719/495-3597; Fax: 719/686-9406

Project Number: ED-98-PO-3746
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $50,000
Abstract: This project investigates the issues surrounding World Wide Web access for people with mental retardation and other cognitive disabilities, and builds a prototype browser called WebWise that improves their Web access. Researchers test the prototype to assess its effectiveness compared to existing Web browsers, and data is collected regarding educational and recreational benefits of the WebWise browser.

Automated PC-based Speech-to-Sign-Language Interpreter

Seamless Solutions, Inc.
3504 Lake Lynda Drive, Suite 390
Orlando, FL 32817
es_ssi@bellsouth.net; seamless@concentric.net
http://www.seamless-solutions.com

Principal Investigator: Edward M. Sims, PhD
Public Contact: Carol J. Wideman, 407/737-7310; Fax: 407/737-6821

Project Number: ED-PO-3531
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $49,640

Abstract: This project demonstrates the feasibility of real-time, PC-based, speech-to-sign-language interpretation, by integrating commercially available speech recognition and language modeling software with Seamless Solutions, Inc.'s PC-based Signing Avatars(tm) 3D character animations of sign language communication. For example, a teacher could speak into a head-mounted microphone, and the sentences would be translated into 3D sign language communication on the student's desktop PC; such a system could also facilitate sign language learning for hearing people.

Small Business Innovative Research (SBIR Phase I)
Massachussettes

Visual Light Audio Information Transfer System (VLAITS)

Talking Lights Company
28 Constitution Road
Boston, MA 02129
novateco@aol.com

Principal Investigator: George Hovorka
Public Contact: Neil Lupton, 617/242-0050; Fax: 617/242-0046

Project Number: ED-98-PO-3928
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $50,000

Abstract: This project develops an inexpensive communication system that uses currently installed visible lighting, such as fluorescent or mercury vapor lighting, as a carrier medium for data. The system modulates light output from the lighting fixture and transmits the data fast enough that no visual flicker is perceptible. The data is received by a personal audio receiver (PAR) and is converted into audio information for the PAR wearer, who may be hard of hearing, have a visual impairment, or may not have a disability. The system is developed, evaluated, and tested with people with visual impairments and people who are hard of hearing to maximize user friendliness and value.

Small Business Innovative Research (SBIR Phase I)
New Jersey

Telecommunications Relay Service Internet Applications

Inclusive Technologies
37 Miriam Drive
Matawan, NJ 07747
tobias@inclusive.com

Principal Investigator: Jim Tobias
Public Contact: 732/441-0831; Fax: 732/441-0832

Project Number: ED-98-PO-3533
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $49,450

Abstract: This project works to reduce the cost of providing Tecommunications Relay Services (TRS), and it creates an open platform on which new TRS features can be created. Activities include developing: (1) a TRS access gateway that allows TTY users to reach TRS via local Internet access points, (2) a "chat" application that allows people using the Internet to reach TRS directly without a TTY, and (3) an extension to items 1 and 2 that uses the Internet for both the data and voice sides of a TRS call.

Small Business Innovative Research (SBIR Phase I)
New York

Development of a Tactile Graphical User Interface

Touch Graphics
140 Jackson Street
Brooklyn, NY 11211
sl@touchgraphics.com

Principal Investigator: Steven Landau
Public Contact: 718/383-8265; Fax: 718/389-1541

Project Number: ED-98-PO-3519
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $49,678

Abstract: This project develops a standardized tactile graphical user interface (TGUI) that allows fuller access to interactive educational tools and forms of entertainment to millions of children, adults, and senior citizens who are blind or who have visual impairments. Goals include: (1) a fully realized tactile "screen" layout that incorporates tools, icons, data entry functions, working space, and calibration and identification features; (2) a sample application based on the TGUI; (3) a full regime of user tests carried out by the American Foundation for the Blind; (4) instructional materials for using the TGUI and the sample application; (5) a final report documenting the findings of the project and the feasibility for future development. The resulting device and accessories are marketed to schools, libraries, and individuals.

Small Business Innovative Research (SBIR Phase I)
Ohio

Development of a Robust, Multi-Line Refreshable Braille Surface

Orbital Research, Inc.
11000 Cedar Avenue, Suite 170
Cleveland, OH 44106
corporate@orbitalresearch.com
http://www.orbitalresearch.com

Principal Investigator: Troy Prince, Sr. Mechanical Engineer
Public Contact: 216/791-6749; Fax: 216/791-6728

Project Number: ED-98-PO-3939
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $50,000

Abstract: This project enhances access to electronic information by developing and testing novel surface materials for a pneumatically activated Refreshable Braille Display System (RBDS). The RBDS is designed to interface with a personal computer for use by people with visual and hearing impairments. Researchers refine the final design through feedback from potential end users and create a prototype and a functional interface with a personal computer.

Small Business Innovative Research (SBIR Phase I)
Pennsylvania

Determining Feasibility of Voice-Controlled Work Holder Tools for People with Disabilities Doing Benchwork Occupations

Aryln Toolworks
155 Shughart Road
Carlisle, PA 17013
osbornej@epix.net

Principal Investigator: Joseph Osborne
Public Contact: 717/249-7729; Fax: 717/249-0774

Project Number: ED-98-PO-3544
Start Date: August 31, 1998
Length: 6 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $38,943

Abstract: This project designs, builds, and tests the feasibility of three types of voice-operated work holder tools. These tools allow people who have lost the use of one hand to continue to work with their hands in benchwork occupations.

An Artificial Hand Controller to Assist Children with Amputations in School and Play

Intelligenta, Inc.
513 Avondale Lane
Friendswood, TX 77546
farry@intelligenta.com
http://www.intelligenta.com

Principal Investigator: Kristin Farry, PhD
Public Contact: 281/992-8021; Fax: 281/992-0144

Project Number: ED-98-PO-4645
Start Date: September 8, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $49,965
Abstract: This project develops an advanced controller for upper extremity prostheses, especially for people with congenital limb deficiencies, and opens powerful new options to tap into the nervous system for prosthesis control using myoelectric signals.

Small Business Innovative Research (SBIR Phase I)
Virginia

Applications of Voice-Controlled Computing for Training Individuals with Disabilities and Individuals Receiving Public Assistance for Transition to Work

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International Management, Development, and Training, Inc.
6163 Fuller Court
Alexandria, VA 22310-2541
jatkins@regents.edu

Principal Investigator: Jerome A. Atkins
Public Contact: 518/464-8620; Fax: 518/464-8777

Project Number: ED-98-PO-3777
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $50,000
Abstract: This project tests the feasibility of training clients with diverse educational and physical disability levels to use a series of standard computer software packages using voice (audible language) as the only input device. A test group of 12 clients is trained in a computer laboratory. Subsequently, clients equipped with their own notebook computers continue individualized training. Continuous evaluation and monitoring prepares for broader test groups.

Virtual Job Environments to Facilitate Vocational Exploration and Rehabilitation

Ross Computational Resources, LLC
222 North Midvale Boulevard, Suite 4
Madison, WI 53705

Principal Investigator: Heidi A. Sindberg
Public Contact: 608/345-5289; Fax: 608/238-1637

Project Number: ED-98-PO-3537
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $49,980

Abstract: This project examines the feasibility of creating virtual-reality-based simulations of job situations and tasks to allow people with acquired brain injury (ABI) to explore career options. Three jobs with several tasks each are simulated using the virtual reality modeling language (VRML) with Java object behaviors. These Web-ready simulations are distributed over the Internet, or provided on CD-ROM, to therapists in rehabilitative settings to perform trials with patients, thus enabling feedback regarding the strengths and limitations of the model.

Small Business Innovative Research (SBIR Phase II)
Florida

Signing Avatars(tm)

Seamless Solutions, Inc.
3504 Lake Lynda Drive, Suite 390
Orlando, FL 32817
es_ssi@bellsouth.net; seamless@concentric.net
http://www.seamless-solutions.com

Principal Investigator: Edward M. Sims, PhD
Public Contact: Carol J. Wideman, 407/737-7310; Fax: 407/737-6821

Project Number: ED-98-PO-3531
Start Date: September 1, 1998
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $125,000

Abstract: Phase I of this project demonstrated the possibility of using computer-generated, virtual reality representations of a signer's face, arms, and hands, called "avatars," to enable interactive sign language communication via standard phone lines and personal computers. Phase II automates transitions between signs (including facial expressions) and expands the Signing Avatars(tm) vocabulary to at least 500 concepts, while improving the representation of facial expressions and joint motions. Goals for the technology include lower-cost long distance sign language communication as well as more natural and rapid interaction between humans and computer applications.

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Small Business Innovative Research (SBIR Phase II)
Maryland

Broadcast Radio for Individuals who are Deaf: Gaining Equity (BRIDGE)

TeleSonic Division of Associated Enterprises, Inc.
31 Old Solomons Island Road
Annapolis, MD 21041
info@telesonic.com
http://www.telesonic.com

Principal Investigator: Leonard A. Blackshear
Public Contact: 410/841-6920; Fax: 410/841-6505

Project Number: ED-98-CO-0055
Start Date: September 1, 1998
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $125,000

Abstract: Phase I of this project proved it is feasible to transmit multimedia signals over commercial radio and to receive them with special decoder devices. Phase II develops working models of radio transmitter and receiver devices that allow simultaneous radio broadcasting of both audio and visual information. Users of TTYs, for example, could receive "closed captioned" broadcasts of radio programs. Research and development tasks include: (1) conducting ongoing technical research, (2) examining future directions in radio broadcasting, (3) finalizing synchronization schemes, (4) updating system specifications, (5) developing models, (6) conducting tests with radio stations, (7) identifying modes of sustaining further development, and (8) reporting results. Anticipated future results include development of a commercial broadcast system.

Small Business Innovative Research (SBIR Phase II)
New York

Advanced Prediction Methods for Augmentative Communication

Enkidu Research, Inc.
P.O. Box 439
Lockport, NY 14095
enkidu@pobox.com
http://www.enkiduresearch.com

Principal Investigator: Gregory W. Lesher, MD
Public Contact: 716/433-0608; Fax: 716/433-6164

Project Number: ED-98-CO-0031
Start Date: September 1, 1998
Length: 24 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: This project improves communication interactions of people with communicative disabilities by improving dynamic word prediction, in which a list of probable words is presented for user selection. In the first phase, the project reduced user keystrokes by 57 percent by exploiting statistical relations between language elements to generate context-dependent prediction lists. The culmination of phase II is a set of laboratory-tested statistical prediction techniques and other software tools, assessment of human prediction performance, and optimization of predictive components. When embedded within Enkidu Research's IMPACT augmentative software, the advanced prediction techniques should provide a new level of performance under a wide range of augmentative configurations.

Improving the Arlyn Arm Transportable Robotic Workstation to Make it a Practical Educational Tool

Arlyn Toolworks
155 Shughart Road
Carlisle, PA 17013
osbornej@epix.net

Principal Investigator: Joseph Osborne
Public Contact: 717/249-7729; Fax: 717/249-0774

Project Number: RW97077001
Start Date: September 15, 1997
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: Phase II of this SBIR involves a redesign of the Workstation into a modularized, easy-to-maintain unit with grater accuracy of movement. Three copies of the new design are used: two in one semester college field trials and one to develop tools and methods for Science Labs and Studio Art classes. This is followed by a Science Lab field trial at the Weidener School, Philadelphia School District, and by the creation of four new interfaces for controlling the arm. This redesign allows students with disabilities to take an active, "hands on" role in Science Labs and Studio Art classes, as well as lectures.

Independent Living and Community Integration

Independent living recognizes that each person has the right to independence through maximum control over his or her life, based on an ability and opportunity to make choices in performing everyday activities. These activities include: managing one's personal life; participating in community life; fulfilling social roles, such as marriage, parenthood, employment, and citizenship; sustaining self-determination; and minimizing physical or psychological dependence on others. Community integration incorporates ideas of both place and participation, so that a person is physically located in a community setting, and participates in community activities. Issues of consumer direction and control also are integral to concepts of community integration. The goals of NIDRR's research program are to encourage independent living and community integration, to achieve more successful outcomes for people with disabilities, and to foster the development of innovative methods to achieve these outcomes and to measure achievement.

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Rehabilitation Research and Training Center on Independent Living and Disability Policy

World Institute on Disability
510 - 16th Street, Suite 100
Oakland, CA 94612-1500
devva@wid.org; jackie@wid.org
http://www.wid.org/projects/ildp.htm

Principal Investigator: Devva Kasnitz, PhD, 510/251-4348
Public Contact: Jacqueline Gross, 510/251-4318 (V); 510/208-9493 (TTY); 510/763-4100 (V-main switchboard); Fax: 510/763-4109

Project Number: H133B50005
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 95 $440,000; FY 96 $440,000; FY 97 $440,000; FY 98 $440,000
Abstract: This RRTC conducts research and training and tests strategies to support the development of public policy in independent living, and to enhance the effectiveness of people with disabilities in influencing policy. The Center's main topic areas include employment, return to work and economic security, the role of independent living centers, community assessment and change, housing, health, and transportation. Through research, training, policy analysis, and dissemination, the Center facilitates the development of tools and systems that empower people with disabilities to act on their own behalf and to create opportunities for people to become agents of change.

Rehabilitation Research and Training Center on Personal Assistance Services (PAS)

World Institute on Disability
510 - 16th Street, Suite 100
Oakland, CA 94612-1500
merrie@wid.org
http://www.wid.org/projects/pas.htm

Principal Investigator: Deborah Kaplan, JD
Public Contact: Merrie Snead, 510/251-4314 (V); 510/208-9493 (TTY); 510/763-4100 (V-main switchboard); Fax: 510/763-4109

Project Number: H133B70008
Start Date: July 1, 1997
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $500,000; FY 98 $500,000
Abstract: This project furthers the understanding that Personal Assistance Service (PAS) systems design can better promote the economic self-sufficiency, independent living, and full integration of people of all ages and disabilities into society. The project explores the models, policies, access to, and outcomes of, personal assistance services, through: (1) gathering perspectives of consumers, program administrators, policy makers, and personal assistants using a State of the States survey and database development; (2) a policy study on the impact of devolution; (3) a cost-effectiveness study; (4) a study of workplace PAS; and (5) a study on the supply of qualified PAS.

Rehabilitation Research and Training Center of the Pacific

San Diego State University Foundation
Interwork Institute
5850 Hardy Avenue, Suite 112
San Diego, CA 92182
guerrero@interwork.sdsu.edu
http://interwork.sdsu.edu

Principal Investigator: Fred McFarlane, PhD
Public Contact: Kenneth Galea'i, PhD, Co-Director, 619/594-8807 (V); 619/594-6406 (TTY); Fax: 619/594-4208

Project Number: H133B40034
Start Date: October 1, 1994
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 94 $650,000; FY 95 $650,000; FY 96 $650,000; FY 97 $650,000; FY 98 $698,972
Abstract: This program builds a local infrastructure of constituencies composed of individuals (consumers and service providers) and systems that deal with issues impacting people with disabilities in the Pacific Basin. The project encourages and challenges people with disabilities to develop the ability to determine their own destinies through research, training, technical assistance, and the dissemination of essential rehabilitation information, and truly values Pacific peoples--their cultures, practices, and societal foundations, including government systems and traditional "communal" and familial systems. The local infrastructure includes a resource-development process that uses research as a basis to develop the local network of identified individuals in the islands.

Rehabilitation Research and Training Center for Children's Mental Health

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University of South Florida
Florida Mental Health Institute
13301 Bruce B. Downs Boulevard
Tampa, FL 33612-3899
kutash@fmhi.usf.edu
http://lumpy.fmhi.usf.edu

Principal Investigator: Robert Friedman, PhD
Public Contact: 813/974-4661 (V); 800/955-8771 (TTY); Fax: 813/974-6257

Project Number: H133B40023
Start Date: September 28, 1994
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 94 $324,750; FY 95 $250,000; FY 96 $250,000; FY 97 $250,000; FY 98 $250,000
Other funding: FY 94 $400,000 (Source: Center for Mental Health Services); FY 95 $400,000 (Source: CMHS); FY 96 $425,000 (Source: CMHS); FY 97 $815,000 (Source: CMHS)
Abstract: This project conducts research and training that improves the delivery of services to children and adolescents who have serious emotional disturbances and their families. Operating under the model that children and families are best served in coordinated, community-based systems of care, the RRTC conducts research in the areas of managed care, accountability, school-based mental health services, and documentation of the characteristics of this population. The project provides training in the areas of leadership and participatory evaluation, as well as on children's mental health services research within a graduate program at the University of South Florida.

Rehabilitation Research and Training Center on Positive Behavioral Support

University of South Florida
Division of Applied Research and Educational Support (DARES)
Department of Child and Family Studies
13301 Bruce B. Downs Boulevard
Tampa, FL 33612
http://lumpy.fmhi.usf.edu/CFSroot/dares/dares.html#anchor175096

Principal Investigator: Glen Dunlap, PhD
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Project Number: H133B980005
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $600,000

Abstract: This project acquires and disseminates new knowledge to advance the field of behavior support in school, home, and community settings. Through research projects and training projects, the Center increases and enhances the effectiveness of behavioral support strategies, expands the applicability of effective practices to broader and more diverse populations, and addresses the need for effective training, technical assistance, and widespread dissemination. The three primary research projects: (1) expand the applicability of effective interventions, (2) increase and enhance the effectiveness of interventions, and (3) understand and describe the long-term impacts and processes of effective behavioral support. Embedded within these research projects are systematic studies of nonaversive interventions, etiology and prevention, maintenance, self-management, and functional assessment. The three primary training projects focus on: (1) inservice and preservice training, (2) dissemination, and (3) technical assistance. The Center is conducted as a consortium that includes the University of South Florida, the University of Oregon, SUNY--Stony Brook, the University of Kansas, the University of California at Santa Barbara, and the University of California at Hayward.

Rehabilitation Research and Training Center on Independent Living (Underserved)

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Project Number: H133B30012
Start Date: August 15, 1993
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 93 $399,924; FY 94 $399,924; FY 95 $399,924; FY 96 $399,924; FY 97 $399,924; FY 98 (No-cost extension through 8/14/99)
Abstract: This RRTC uses consumer-empowered teams to: (1) identify needs and facilitate research, relevant development, and product dissemination; (2) integrate existing independent living knowledge and technology; (3) assess needs; (4) adopt consumer-controlled training interventions; (5) develop models to improve outreach and participation in administration and policy making; and (6) develop methods to evaluate the effectiveness of independent living programs in providing services to underserved populations. The project also provides information and referral; performs needs assessments, benefit-cost analyses, and outcome studies; develops curricula/training materials; conducts conferences; conducts training seminars; performs systems analyses; conducts surveys; develops technology; and provides technical assistance. A needs-based research development, dissemination, and training system achieves these objectives through a seven-phase plan.

Rehabilitation Research and Training Center for Community Integration of Persons with Mental Retardation

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Principal Investigator: Charlie Lakin, PhD, 612/624-5005
Public Contact: Mary Hayden, PhD, 612/625-6046; Fax: 612/625-6619

Project Number: H133B980047
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $700,000
Abstract: The Center conducts research, training, technical assistance, and dissemination of relevance to enhancing inclusion and self-determination of citizens with mental retardation and related developmental disabilities (MR/DD). The research program has a strong applied focus and recognizes broad responsibilities for organized, comprehensive, and accessible research in each of six outcome areas: support to families, state system reform, Medicaid services, policies and practices for full participation, consumer controlled services, and direct support personnel. The approach to each priority area includes: (1) research syntheses of the state of knowledge and practice; (2) secondary analyses of high quality, topically relevant national and state data sets; (3) case studies of best practices; (4) evaluation of demonstration efforts to improve policy and practice; (5) survey and interview studies of critical issues; and (6) group process studies with key constituencies. An integrated "intramural" training program addresses the development of a "next generation" of skilled disability researchers and rehabilitation professionals, including graduate students, postdoctoral associates and research interns. "Outreach" training programs provide training and technical assistance to agencies and individuals providing support to people with MR/DD, including members of their own families. Outreach programs include conferences and workshops for a wide variety of national, regional and state audiences, a state of the science conference, and intensive technical assistance with community organizations, including advocacy and self-advocacy organizations. The Center disseminates practical information to targeted audiences (i.e., IMPACT, Policy Research Brief, Frontline Initiative) and maintains high standards for scholarly productivity (i.e., books, journal articles). The Center provides print and Web site access to a variety of other information including descriptions of best practices, national statistics on services and expenditures, resource guides, and distance learning training.

Rehabilitation Research and Training Center on the Community Integration of Individuals with Traumatic Brain Injury

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Project Number: H133B980013
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $800,000

Abstract: This program includes seven projects: (1) evaluate a measure of community integration that assesses an individual's level of participation, and the experience of thai participation, in home and community; (2) evaluate replications of The Program Without Walls, a pioneering, consumer-oriented program for the delivery of vocational rehabilitation services developed in Rochester, New York; (3) respond to the needs of families by providing a "veteran" mentor, one with long-term experience in coping with the challenges of TBI in their own family; (4) evaluate the Consumer Advocacy Model (CAM), developed to address alcohol or drug abuse in people with disabilities in an outpatient TBI day-treatment program; (5) study the emergence and resolution of post-TBI behavioral and emotional challenges to determine who is most at risk, and when, and what factors in the environment help in overcoming challenges such as substance abuse, depression, and anxiety disorders; (6) conduct a longitudinal study of older individuals with TBI and their counterparts without disabilities, to explore the factors associated with successful post-TBI aging; (7) validate the Brain Injury Screening Questionnaire (developed by this RRTC) within a high school in New York City. Both academic performance and behavioral challenges of children identified as having had a brain injury are documented.

Rehabilitation Research and Training Center on Family Support and Children's Mental Health

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Project Number: H133B40021
Start Date: October 1, 1994
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 94 $250,000; FY 95 $250,000; FY 96 $250,000; FY 97 $250,000; FY 98 $250,000
Other funding: FY 94 $400,000 (Source: Center for Mental Health Services); FY 95 $400,000 (Source: CMHS); FY 97 $425,000 (Source: CMHS)
Abstract: RRTC activities include the development and evaluation of strategies that build the capacities of families, professionals, service providers, program administrators, and policy makers to establish services that are flexible and organized around individual families' needs.

Rehabilitation Research and Training Center in Community Integration for Individuals with Spinal Cord Injury

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Project Number: H133B40011
Start Date: January 24, 1994
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 94 $650,000; FY 95 $650,000; FY 96 $650,000; FY 97 $650,000; FY 98 $650,000

Abstract: This RRTC: (1) conducts a program of research and training that develops and disseminates new knowledge and techniques to improve personal and psychological adjustment after spinal cord injury (SCI); (2) enhances family life, including involvement of family members in rehabilitation, and options for marriage, sexuality, reproduction, and parenting; (3) enhances participation in community life; (4) improves and maintains health status; (5) improves systems for long-term care (health and other support services) in the community; and (6) identifies gender and cultural differences relevant to community integration of people with SCI. This RRTC houses the National Database of Educational Resources on SCI, collected from a nationwide network of rehabilitation facilities and NIDRR-funded projects on SCI.

Rehabilitation Research and Training Center on Independent Living Center Management and Services

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Project Number: H133B50003
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 95 $500,000; FY 96 $500,000; FY 97 $600,000; FY 98 $600,000
Other funding: FY 95 $100,000 (Source: Rehabilitation Services Administration); FY 96 $100,000 (Source: RSA)
Abstract: This project: (1) enhances management performance in independent living centers through improved management practices, developed and tested in research-based models and disseminated through training and technical assistance programs; (2) identifies model programs to address diversity and inclusion centers; (3) uses innovative learning techniques to improve the delivery of training and retraining programs for center staff; (4) examines strengths and weaknesses of various governing board structures; (5) improves service coordination between independent living centers, agencies, and programs providing employment services to people with disabilities; (6) documents and improves operations of statewide independent living councils; (7) identifies innovative strategies for center for independent living (CIL) collaboration with school programs, to facilitate transition services for youth with disabilities; (8) analyzes CIL funding and diversification patterns; (9) ensures coordination with training and technical assistance efforts funded by the Rehabilitation Services Administration; and (10) disseminates findings of the RRTC through research-based training and technical assistance to independent living centers, agencies, programs, and other relevant audiences.

Rehabilitation Research and Training Center on Improving Community-Based Rehabilitation Programs

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Principal Investigator: Daniel C. McAlees, PhD, 715/232-1389 (V)
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Project Number: H133B30088
Start Date: August 18, 1993
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 93 $994,524; FY 94 $600,000; FY 95 $600,000; FY 96 $600,000; FY 97 $600,000; FY 98 (No-cost extension through 2/28/99)
Other funding: FY 94 $74,997; FY 95 $150,000; FY 96 $75,000

Abstract: This RRTC aids community-based rehabilitation programs in adapting and adopting demonstrated practices and methodologies that enhance achievement and sustainability of community integration and economic independence of people with disabilities. The project conducts programmatic research, demonstration, training, and technical assistance in order to: (1) increase the effective integration or reintegration of people with disabilities into the mainstream of the community, (2) increase the variety of options that individuals can use to access economic resources and employment with which to ensure their continued participation, and (3) demonstrate improvements in the quality of community-based programs.

Field-Initiated Projects (FIPs)
California

The Relationship Between Early Experiences and Development in Young Children with Severe Visual Impairments: A Cross-Cultural Perspective

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Project Number: H133G80119
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $116,910

Abstract: This longitudinal project examines the relationship between early experiences and the development of infants and toddlers who are blind. Subjects consist of 60 caregiver-child dyads divided equally into four different ethnic groups (i.e., African-American, Hispanic/Latino, Asian-American, and Euro-American). The children, approximately 12 months of age at the onset of the study, are examined for approximately 16 months, with data collection occurring at four-month intervals. Major objectives include: (1) to describe the home environment and early experiences of young children with severe visual impairments; (2) to examine the differences in home environment and early experiences between African-American, Hispanic/Latino, Asian-American, and EuroAmerican families; (3) to examine the relationship between caregiver-child interaction and home environment to the development of young children with severe visual impairments; (4) to identify within-group variables that positively influence the developmental outcomes of young children with severe visual impairments; and (5) to identify culturally-accepted practices and strategies that facilitate the developmental outcomes of young children with severe visual impairments.

Outcomes for Children and Youth with Autism

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Principal Investigator: Phillip Strain
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Project Number: H133G70006
Start Date: October 1, 1997
Length: 14 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $125,000; FY 98 $124,999
Abstract: This project helps to identify key community variables that enhance or hinder positive, long-term outcomes of early intervention services for children and youth with autism. It provides a community-based ecobehavioral assessment of the current status of children 6 to 15 years of age who received comprehensive early intervention services for children diagnosed by at least two independent sources as autistic (using DSM-III criteria). Using ecobehavioral assessment procedures, the project focuses its efforts on completing a comprehensive, community-setting portrayal of children who vary from 1 to 13 years away from their early intervention experience. Based upon hypotheses generated by correlational and path analyses between criterion outcomes and ecobehavioral events/settings, researchers expect to identify key community variables that serve to enhance or hinder positive, long-term outcomes.

Evaluation of Voucher Alternatives for Early Intervention Developmental Disability Services

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Project Number: H133G80121
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $119,687

Abstract: This study documents the operation of a funding program that provides a flexible mechanism for early intervention services in the Denver area for families with children from birth to age 3 with developmental disabilities. The system is evaluated in terms of administrative and service costs, service utilization, family satisfaction, and changes in child functional abilities. The study includes a comparison group to which services are provided through a traditional non-voucher system. These comparisons are made for administrative and service costs, patterns of service utilization, child, parent, and system outcomes. The outcome of this study is increased understanding of how flexible funding can contribute to full inclusion by examining their effect on families and early intervention settings.

Developing and Evaluating Family Networks: Positive Behavioral Support

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Principal Investigator: Glen Dunlap, PhD; Bobbie Vaughn, PhD, 813/974-4612
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Project Number: H133G60119
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000

Abstract: The purpose of this project is to develop, demonstrate, and evaluate a program for building competent family networks concerned with challenging behaviors and developmental disabilities. Using a participatory training approach in collaboration with community agencies (e.g., Parent-to-Parent), the project is establishing family networks of reciprocal support. Perspectives and practical techniques of behavioral support are being shared with the networks through a combination of demonstration, presentation, practice, and coaching strategies. After the initial period of network development and training in behavioral support strategies, the project assists in the maintenance of network interactions and evaluates the short-term and longitudinal processes and outcomes associated with the network's interactions. Over the three-year period, the project is conducted within three multicultural community "cohorts" of family members.

Integrated Services and Parent Partnerships in Schools: Meeting the Needs of Children with Emotional and Behavioral Disabilities and Their Families

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Project Number: H133G70013
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $125,000; FY 98 $124,102
Abstract: This project empirically tests the effectiveness of an integrated services model designed to help children with severe emotional and behavioral disabilities (EBD) by including parents as partners with service providers and schools. The project identifies outcomes for children with EBD in the areas of academic achievement, social functioning, and community adjustments. Under the conditions of an integrated services model, outcomes of parents as partners versus usual special education practice are compared.

Home-Based Video-Counseling for Rural At-Risk Adolescents with Epilepsy and Their Parents: An Accessibility and Outcome Analysis

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Project Number: H133G60087
Start Date: December 1, 1996
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 96 $157,731; FY 97 $118,455; FY 98 $98,813
Abstract: This project is evaluating the impact of issue-specific, video-system counseling on the psychosocial and educational functioning of at-risk teens with epilepsy and their parents who reside in rural areas. Objectives include: (1) assessing the difference between home-based video counseling and office-based counseling on the level of improvement, severity, and frequency of specific problems identified by at-risk teens and their parents; (2) assessing the difference between home-based video counseling and office-based family counseling on the therapeutic relationship between family member and counselor, and on overall consumer satisfaction; (3) examining the effects of home-based video counseling and office-based counseling on overall family functioning; and (4) testing for differences in adherence to intervention and in attrition rates between families in the two counseling conditions.

Secondary Conditions, Assistance, and Health-Related Access Among Independently Living Adults with Major Disabling Conditions

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Project Number: H133G60037
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 96 $124,136; FY 97 $124,136; FY 98 $124,136
Abstract: Participants in this study are affiliated with six Massachusetts independent living centers (ILCs). The cross-disability sample includes people with a range of significant physical, mental, sensory, and developmental disabilities who require assistance with activities of daily living. Primary outcomes of interest are: (1) the frequency and severity of secondary conditions, including skin problems, seizures, chronic pain, spasms, falls, fatigue, respiratory tract infections, and urinary tract infections; and (2) reactions to medication, depression, anxiety, and injuries related to medical equipment. Mediating variables include: adequacy of personal assistance, assistive technology, access to health promotion and health care services, environmental barriers, transportation, employment, education, socioeconomic status, smoking, use of substances, and compliance with prescribed health care routines. The research study includes two annual cross-sectional surveys, each of 300 randomly-selected ILC consumers, to determine prevalence, distribution, frequency, and severity of secondary conditions. Focus groups of ILC consumers and others help interpret the data.

Preventing Severe Behavior Problems

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Principal Investigator: V. Mark Durand, PhD, Project Director
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Project Number: H133G980104
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $123,192

Abstract: This project studies aspects of the child and his or her home and family to identify risk and protective factors in the development of severe behavior problems to identify additional ways to help to prevent later, more severe problem behaviors. Behaviors such as aggression and self-injurious behavior represent some of the most difficult obstacles faced by individuals with disabilities, and seriously interfere with efforts to provide them with more independent lives. The first goal is to evaluate the impact of the interventions both on a short-term and long-term basis, by comparing three groups in a stratified-random sample: (1) individuals who are to receive traditional (non-function based) intervention; (2) individuals who are to receive a package of function-based interventions; and (3) individuals who are to receive a package of function-based behavioral interventions with ongoing intervention and consultative support. The study evaluates if intervention support successfully prevents behavior problems from escalating into more severe problems; follow-up is conducted up to two years following the initial intervention. The second goal is to identify developmental and epidemiological patterns of behavior for all 140 children that are predictive of later problems, over a three year period, using sophisticated structural equation modeling.

Building Comprehensive Behavioral Support: Bridging the Gap

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Project Number: H133G80116
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $124,975
Abstract: This project develops, validates, and disseminates a model of behavioral support that transforms research results into practical strategies that families and residential providers can use to break the destructive cycle of problem behaviors in the lives of individuals with severe intellectual disabilities. Such problem behaviors remain the single most common reason people with disabilities are isolated from school, work, and community opportunities. The project focuses on youth and adults with severe intellectual disabilities who have a history of problem behaviors, with an emphasis on providing residential staff and families with a practical technology that allows them to redesign behavioral support. Central objectives of the project: (1) to define a model for moving to comprehensive, positive behavioral support; (2) to conduct three research studies examining the effects of the model on change in problem behaviors and lifestyle; (3) to develop an operations manual that support personnel can use to create practical plans of behavioral support; (4) to field-test the operations manual with 2-4 residences that provide residential support to people with severe intellectual disabilities and problem behaviors; (5) to disseminate project outcomes/products; (6) to manage the project; and (7) to evaluate the project.

Women's Personal Assistance Services (PAS) Abuse Research Project

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Project Number: H133G70154
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $125,000; FY 98 $125,000

Abstract: This project increases the identification, assessment, and response to abuse by formal and informal personal assistance service (PAS) providers of women with physical and physical and cognitive disabilities living independently in the community. The aims of the project: (1) develop culturally sensitive screening approaches to identify PAS abuse, (2) develop a culturally appropriate PAS abuse assessment protocol, and (3) develop culturally appropriate response strategies to prevent and manage PAS abuse. Culturally diverse participants assist in the development of these three aims. The study includes three phases, beginning with a focus group study of culturally diverse women with physical and cognitive disabilities. Phase II involves the use of findings from Phase I to develop and disseminate a survey of 260 culturally diverse females with disabilities drawn from four national organizations. Phase III involves the development and field testing of the effectiveness of the screening, assessment, and support protocols, the final product being a comprehensive package of PAS abuse prevention materials. The project plans to disseminate these materials on a national basis.

PALS: Postsecondary Adjustment, Literacy, and Socialization for Secondary Students with Mild/Moderate Disabilities

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Project Number: H133G70050
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $124,946; FY 98 $124,946
Abstract: This project conducts an upward extension of Peer Assisted Learning Strategies (PALS) to improve Postsecondary Adjustment, Literacy, and Socialization (PALS) for secondary students with mild and moderate disabilities (MMD): PALS for PALS. The goals are to improve literacy and numeracy, enhance socialization, and facilitate successful postsecondary adjustments for students with MMD who enter technical training and nonsupported work settings after high school. Development of this instructional approach is expected to contribute to high schools' capacity to provide comprehensive and effective programs for students with MMD.

Promoting Choice and Self-Determination in Adults with Cognitive Disabilities: A Research and Demonstration Project

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Principal Investigator: Michael Wehmeyer, PhD
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Project Number: H133G50178
Start Date: October 1, 1995
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 95 $124,732; FY 96 $127,777; FY 97 $124,732; FY 98 (No-cost extension through 3/31/99)

Abstract: The Arc, a national organization on mental retardation, in conjunction with affiliated chapters in Baltimore and Philadelphia, operates a project that conducts four research studies that: (1) explore the degree to which people with mental retardation and cognitive disabilities are self-determined and experience choices in their lives, (2) examine the effects of mental retardation level on the expression of self-determination, and (3) examine the effects of living and working environments on self-determination. Subsequently, project personnel develop and field test a self-directed, instructional program designed to enable adults with mental retardation to take a leading role in planning and decision-making meetings and overcome some of the barriers and stereotypes that limit self-determination in their lives. The project addresses questions that have been generated through The Arc's research efforts in the area of self-determination and cognitive disability and expands and revises materials developed by The Arc to enable students with disabilities to chair their own educational transition planning meeting.

Longitudinal Study of Early Intervention Costs, Effects, and Benefits for Medically Fragile Infants, Children with Disabilities, and Their Families

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Project Number: H133G70190
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $124,996; FY 98 $124,987

Abstract: This project gathers descriptive longitudinal information on a well-characterized sample of medically fragile infants, children with disabilities, and their families to evaluate the effects and cost benefits of varying levels of early intervention. No comparable data sets exist. The 400 subjects the investigators are to re-evaluate currently range in age from 7 to 16 years. The current longitudinal study has already examined the costs of the various levels of intervention that were employed when the study subjects were preschool-aged. The research methodology has the capacity to judge the effectiveness of various models of intervention (e.g., parent involvement), as well as the economic benefits of those models.

Teaching Test-Taking Strategies: A Novel Intervention for Students with Learning Disabilities

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Project Number: ED-98-PO-3748
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Paul R. Ackerman, PhD
NIDRR Funding: FY 98 $50,000
Abstract: This project focuses on the development of a novel instructional program to teach study and test-taking strategies that enable students with learning disabilities to demonstrate their potential. Such a program is critical as test-taking deficiencies represent a major hurdle for students with learning disabilities from elementary school into college. The STRATS (Strategies for Test Success) program consists of strategies which help students to organize, memorize, prioritize, shift flexibly, and isolate critical information. The experimental group of students with learning disabilities is receiving the test-taking intervention on a bi-weekly basis for seven weeks. The control group of students with learning disabilities is receiving only pre- and post-testing. The pre-post changes are expected on the TESTS strategy questionnaire, measures of retention, and a standardized reading achievement task.

Associated Disability Research Areas

Related disability research emphasizes knowledge areas that are cross-cutting and essential to the support and refinement of disability research generally. The common theme linking disability statistics, outcome measures, Disability Studies; rehabilitation science, and international activities, is that they all provide essential frameworks and building blocks that enable the disability research enterprise to thrive and to address important issues in meaningful ways.

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http://www.nau.edu/~ihd

Principal Investigator: Richard Carroll, PhD
Public Contact: Priscilla Lansing Sanderson, Project Director, 520/523-4791 (V); 520/523-1695 (TTY); Fax: 520/523-9127

Project Number: H133B980049
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $595,000
Abstract: This Center, in a collaboration that includes the Consortia of Administrators for Native American Rehabilitation (CANAR) and other Rehabilitation Research and Training Centers, develops, implements, and conducts research and training activities around four core areas comprised of eight research projects and six training projects. The four core areas are: (1) investigating and analyzing existing disability and employment data, and recommending methodology for planning and evaluating employment services for American Indians and Alaska Natives; (2) recommending successful strategies to improve employment outcomes, including existing employment and vocational rehabilitation service practices American Indians and Alaska Natives with disabilities on or off reservations; (3) developing and evaluating innovative and culturally appropriate vocational rehabilitation services for the employment of American Indians and Alaska Natives; and (4) disseminating results of the data collection and evaluation of model employment services to a range of relevant audiences, using appropriate accessible formats. Consultation with researchers, CANAR, and the training team helps develop a dissemination method that is accessible and acceptable for each respective target community. Information and resources are developed and disseminated to providers, tribal and state vocational rehabilitative agencies, consumers, and Regional Continuing Education Programs.

Disability Statistics Rehabilitation Research and Training Center

University of California/San Francisco
Institute for Health and Aging
Box 0646, Laurel Heights
San Francisco, CA 94143-0646
disstats@itsa.ucsf.edu; bwenger@itsa.ucsf.edu
http://dsc.ucsf.edu

Principal Investigator: Mitchell P. LaPlante, PhD, 415/502-5210 (V/TTY)
Public Contact: Diana Stammerjohn, Program Coordinator; Barbara Wenger, Information Specialist, 415/502-5217 (V/TTY); Fax: 415/502-5208

Project Number: H133B980045
Start Date: December 1, 1998
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $700,000
Abstract: The Center conducts research in the demography and epidemiology fields of disability and disability policy, including costs, employment statistics, health and long-term care statistics, statistical indicators, and congregate living statistics. Statistical information is disseminated through published statistical reports and abstracts, journals, professional presentations, and a publications mailing list. Training activities and resources (such as a predoctoral program) disseminate scientific methods, procedures, and results to both new and established researchers, policymakers, and other consumers, and assist them in interpreting statistical information. A National Disability Statistics and Policy Forum is conducted periodically to foster dialogue between people with disabilities and representative organizations, researchers, and policymakers.

Rehabilitation Research and Training Center on Policies Affecting Families of Children with Disabilities

University of Kansas
Institute for Life Span Studies, Beach Center
3111 Hayworth Hall
Lawrence, KS 66045
beach@dole.lsi.ukans.edu
http://www.lsi.ukans.edu/beach/beachhp.htm

Principal Investigator: Ann Turnbull, PhD; H. R. Turnbull, PhD
Public Contact: H. R. Turnbull, PhD, 785/864-7608; Fax: 785/864-7605

Project Number: H133B980050
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $650,000
Abstract: This project assesses policies and services and their impact on families' quality of life, focusing on four priorities: (1) developing an analytical framework for policy and service analysis; (2) developing measurement tools that apply state-of-the-art legal and policy analysis methodologies to the assessment of policies, service systems, and family outcomes; (3) identifying impacts of partnership (including interagency collaboration and coordination) on family outcomes; and (4) conducting research with families from diverse backgrounds in four communities and states (KS, MN, LA, NC). This research agenda is composed of five comprehensive training projects, six dissemination projects and five technical assistance projects. Training includes: (a) preservice training and the preparation of three textbooks; (b) inservice training that helps service providers and families form community coalitions to the 12 measurement toolkit; and (c) sponsorship of an international state-of-the-science conference. Dissemination includes: (a) networking with federal agencies; (b) developing and disseminating the measurement toolkit, six users' manuals and a management information software package; and (c) publishing articles in peer-reviewed newsletters, research briefs, fact sheets, a Web site, and a newsletter. Technical assistance focuses on: (a) enhancing federal and state policies; (b) summer institutes with state-local partners on policy and service analyses; and (c) development of partnerships with federal agency liaisons, grantees, and key family and professional organizations to mentor them in using the results of project research to enhance policies and services.

The Center on Emergent Disability

University of Illinois/Chicago
Institute on Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
gfujiura@uic.edu
http://www.uic.edu/depts/idhd/emer-dis.html

Principal Investigator: Glenn T. Fujiura, PhD
Public Contact: 312/413-1977; Fax: 312/413-1326

Project Number: H133A60051
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $349,995; FY 97 $349,995; FY 98 $95,970
Abstract: This Center focuses on characterizing the impact of major health, social, and economic trends on the manifestation of disability in America, through a broadly conceived nationwide research effort across multiple disciplines and constituencies. Core activities include secondary analyses of major data sets, evaluation of public health surveillance systems, local needs assessment, policy analysis, and dissemination. This project is headquartered at the University of Illinois at Chicago with collaborating research groups at the University of Southern California Children's Hospital, Rancho Los Amigos Medical Center, Georgetown University Medical Center, Baylor College of Medicine, University of Minnesota, Northern Arizona University, and Vanderbilt University.

The Disabled Persons' Independence Movement: The Formative Years in Berkeley California

University of California/Berkeley
The Bancroft Library
Berkeley, CA 94720-6000
alage@library.berkeley.edu

Principal Investigator: Charles Faulhaber, 510/642-3781
Public Contact: Ann Lage, 510/642-7395; Fax: 510/642-7589

Project Number: H133G60193
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000
Abstract: This project develops a research platform that documents, preserves, and makes accessible to researchers a major segment of the history of the independent living movement and the struggle for civil rights by people with disabilities. The project conducts oral history research and collects written and visual documentation of the formative years of the movement in Berkeley California, and its interrelations and influences nationwide. It establishes a plan and process for ongoing documentation of key organizations in the Berkeley area serving people with disabilities both regionally and nationally. All research materials are archived in the Bancroft Library at the University of California at Berkeley.

Disability Rights Leadership Archive

University of San Francisco
McLaren School of Business
Executive Master of Management and Disability Services Program
2130 Fulton Street, Campion D-9
San Francisco, CA 94117-1045
johnsonp@aol.com

Principal Investigator: Paula Johnson
Public Contact: 415/422-2534; Fax: 415/422-2551

Project Number: H133G60192
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $138,277; FY 97 $138,277; FY 98 $124,836
Abstract: This project: (1) ensures the survival of archival materials documenting the history of the disability rights movement; (2) fosters disability studies by increasing access to and use of these materials through the creation of the *Scholar's Guide to Disability Rights Media Sources*, the *Disability Rights Timeline*, research papers, and a final manuscript; (3) increases public awareness and understanding of the disability rights movement by furthering the development of the television program *Created Equal*, that presents, for the first time to the American public, a comprehensive, historically accurate view of disability rights, in the mostly widely used learning vehicle, television. The project is led and staffed by people with disabilities, academic and documentary experts, and graduate students in the field.

Field-Initiated Projects (FIPs)
Minnesota

Studies of Persons with Developmental Disabilities within the Sample of the 1994-95 Disability Supplement to the National Health Interview Survey

University of Minnesota
Institute on Community Integration
102 Pattee Hall
150 Pillsbury Drive Southeast
Minneapolis, MN 55455
lakin001@umn.edu
http://www.ici.coled.umn.edu/ici

Principal Investigator: Charlie Lakin, PhD, Project Director, 612/624-5005
Public Contact: Mary Hayden, PhD, 612/625-6046; Fax: 612/625-6619

Project Number: H133G980082
Start Date: July 1, 1998
Length: 24 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $76,066

Abstract: This project extracts, analyzes, and disseminates data on people with developmental disabilities from the 1994-95 Disability Supplement to the *National Health Interview Survey*. The combined 1994 and 1995 Disability Supplement and the core *National Health Interview Survey* for those years make up the most comprehensive survey of non-institutionalized people with disabilities ever conducted in the United States and the first national survey to include people with disabilities of all ages. Project researchers analyze the data to determine the following related to people with developmental disabilities: (1) prevalence in the United States; (2) demographic, functional and health characteristics, including specific conditions and multiple impairments; (3) services, devices, and technology needed and used; (4) social and employment experiences; (5) public and private health and personal assistance coverage status; (6) living arrangements in non-institutional settings; (7) in-home formal and informal supports needed and received; (8) variations in these or other areas that may be associated with factors such as age, severity of disability, racial or ethnic background, or place of residence; and (9) in-depth analyses of critical issues such as unserved and underserved individuals waiting for services, characteristics and qualities of direct support staff members in in-home settings, and guardianship status for adults with developmental disabilities. Results are disseminated to policy makers and advocacy groups and tailored analyses are conducted as requested by federal agencies and other groups. Comprehensive project reports are distributed in both print form and electronically on the University of Minnesota Institute on Community Integration Web site.

Knowledge Dissemination and Utilization

Dissemination and utilization are the tools though which to ensure that people with disabilities become fully integrated and participating members of society. NIDRR's dissemination and utilization efforts ensure the widespread distribution, in usable formats, of practical scientific and technological information generated by research, demonstration, and related activities. NIDRR's challenge is to reach diverse and changing populations; to present research results in many different and accessible formats; and to use technology appropriately.

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Improving Access to Disability Data

InfoUse
2560 Ninth Street, Suite 216
Berkeley, CA 94710
ddata@infouse.com
http://www.infouse.com/disabilitydata

Principal Investigator: Susan Stoddard, PhD, AICP
Public Contact: Administrative Assistant, 510/549-6520 (V); 510/549-6523 (TTY); Fax: 510/549-6512

Project Number: H133D50017
Start Date: August 1, 1995
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 95 $174,976; FY 96 $174,976; FY 97 $174,976; FY 98 (No-cost extension through 7/31/99)

Abstract: InfoUse's Center on Access to Disability Data is the central source for accessible, easy-to-understand, user-friendly disability statistics data and related technical reports. The project provides this information to businesses, the media, urban planners and policymakers, and the disability community. The first major product, the *Chartbook on Disability in the United States, 1996*, provided updated statistical information on a range of disability topics. The *Chartbook on Work and Disability in the United States, 1998*, published in October 1998, provides information about the status of people with disabilities in the labor force. Material for the *Chartbook* series and related fact sheets are available to the public in a variety of published and electronic formats, including print and electronic media. The Center's Web site provides electronic documents, includes guidelines for accessible Web publishing, and provides links to major national data sources including data sites developed by other NIDRR grantees and major national disability data suppliers.

National Resource Center for Parents with Disabilities

Through the Looking Glass
2198 Sixth Street, Suite 100
Berkeley, CA 94710-2204
tlg@lookingglass.org
http://www.lookingglass.org

Principal Investigator: Megan Kirshbaum, PhD
Public Contact: Paul Preston, PhD, 510/848-1112 (V); 800/644-2666 (V - national); 800/804-1616 (TTY - in state only); Fax: 510/848-4445

Project Number: H133A80001
Start Date: April 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $500,000
Abstract: The National Resource Center for Parents with Disabilities focuses on the 10.9 percent of U.S. families with children in which one or both parents have a disability--nearly 9 million parents. The Center provides: (1) accessible and disability-appropriate information regarding parenting with a disability to parents, potential parents, disability advocates and legal, medical, and social service providers; (2) training to parents with disabilities, potential parents, and service providers; (3) technical assistance that increases informed practice and informed decisions; (4) program consultation that increases local and regional services that are accessible and disability-appropriate. To accomplish these goals, project researchers: (1) consolidate and disseminate information and resources, (2) synthesize and disseminate materials from other agencies and organizations, (3) develop and disseminate new materials tailored to address the specific needs of parents with disabilities and service providers, (4) expand the national availability of training and technical assistance to parents with disabilities and service providers, and (5) develop curricula to train future service providers. Parenting areas designated as highest priority are: custody, pregnancy and birthing, adoption, adaptive parenting equipment, and general parenting information. The project is staffed by nationally recognized experts regarding parents with disabilities, the majority of whom are parents with disabilities or family members of parents with disabilities.

International Disability Exchanges and Studies (IDEAS) Project 2000

World Institute on Disability
510 - 16th Street, Suite 100
Oakland, CA 94612-1500
kathy@wid.org
http://www.wid.org/projects/intl.htm

Principal Investigator: Deborah Kaplan, JD; Barbara Duncan
Public Contact: 510/763-4100 (V); 510/208-9493 (TTY); Fax: 510/763-4109

Project Number: H133D40028
Start Date: October 1, 1994
Length: 60 months
NIDRR Officer: Paul R. Ackerman, PhD
NIDRR Funding: FY 94 $554,158; FY 95 $454,000; FY 96 $454,000; FY 97 $454,000; FY 98 $454,000
Abstract: The Project enhances the impact of international activities on the lives of Americans with disabilities and the rehabilitation community in the areas of technology transfer, women's issues, employment, and independent living. It increases the participation of the U.S. disability community in significant, international research projects and policy debates. In 1997 the project provided logistics for the International Leadership Forum for Women with Disabilities, which hosted 620 women with disabilities from 83 countries. Project outcomes include: (1) an international comparison and evaluation of employment policies in the United States and other select countries; (2) a functioning, international network as a model of wheelchair technology transfer and improved techniques in self care for people with spinal cord injuries; (3) tested training modules to help women with disabilities improve their status; (4) an analysis of various interpretations of independent living in different countries; (5) operational databases on specific content areas and domestic sites of excellence for international visitors; and (6) targeted dissemination of results of the above activities.

Disability and Rehabilitation Research Project to Disseminate Independent Living Research Information Through the Mass Media to Persons with Disability

Exploding Myths, Inc.
2973 Beech Street
San Diego, CA 92102

Principal Investigator: Cynthia Jones
Public Contact: 619/234-3138; Fax: 619/234-3155

Project Number: H133A980045
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $299,991

Abstract: This project disseminates research information on Independent Living (IL) through the popular mass media. Like many groups who rely on well-planned programs of media dissemination involving media relations firms, this project hires and works proactively with a media relations firm and selected researchers to obtain coverage of IL issues in the popular mass media. The goal is to create the recognition that the target population and its issues require ongoing serious coverage. The project conducts a proactive "media watch" to identify opportunities to insert an IL perspective into public debates on policy issues in the popular mass media. As part of that watch, the project establishes a "rapid response" program to provide members of the popular mass media with resources among IL researchers, and generate response from the IL community to stories that omit the IL perspective. The project develops an interactive Web site to provide information and resources about IL research to members of the popular mass media, researchers, and consumers.

TECH CONNECTIONS: Improving the Utilization of Existing and Emerging Rehabilitation Technology in the State Vocational Rehabilitation Program

United Cerebral Palsy Associations, Inc.
Community Service Division
1660 L Street Northwest, Suite 700
Washington, DC 20036-5602
http://www.ucpa.org

Principal Investigator: Karen F. Flippo
Public Contact: 202/776-0406; Fax: 202/776-0414

Project Number: H133A980052
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $499,970
Abstract: TECH CONNECTIONS facilitates the use of rehabilitation technology in state vocational rehabilitation (VR) programs. This customer-responsive, customer-driven training, technical assistance, and dissemination project features: (1) a multifaceted approach to training that builds capacity through new curricula and new supporting materials that augment existing materials, for use by project-trained rehabilitation and university staff; (2) regional "Train-the-Trainer" forums, topic-specific audio conferences, and satellite video training; (3) individualized technical assistance and information about the assistive technology, on a case-by-case basis, for rehabilitation professionals and for their customers with disabilities; and (4) broad-based outreach and dissemination to people who provide assistive technology. Training includes an Internet-based discussion group open to rehabilitation professionals, people with disabilities, and other interested parties and a mentoring program pairing experienced technology users with rehabilitation professionals or people with disabilities seeking assistive technology. Additional methods of outreach include project announcements circulated to rehabilitation, education and disability listservs; presentations at conferences and workshops; a tollfree phone number; and an Internet-based newsletter. United Cerebral Palsy Association works in collaboration with the Center for Rehabilitation Technology and the Southeast Disability and Business Technical Assistance Center.

Improving Research Information Dissemination and Utilization to Promote Independent Living

University of Kansas
Research and Training Center on Independent Living
Institute for Life Span Studies
1052 Dole Building
Lawrence, KS 66045
rtcil@ukans.edu; jbudde@dole.lsi.ukans.edu
http://www.lsi.ukans.edu/rtcil/rtcil.htm

Principal Investigator: James Budde, PhD
Public Contact: 785/864-4095; Fax: 785/864-5063

Project Number: H133A980048
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $299,999

Abstract: This project increases the amount of relevant and useful independent living (IL) information to consumers to enable them to reach their IL goals more effectively. These research, development, dissemination, utilization, and technical assistance projects provide more effective and economical dissemination of IL research to people with disabilities and family members. Activities include: (1) identifying needs and barriers and how input from consumers can help remove them and using this knowledge to create a research primer; (2) developing an information infrastructure for research that includes a searchable and interactive IL database and uses existing Internet tools such as chat rooms and listservs; (3) providing technical assistance to consumers, family members, policy makers, and practitioners; (4) training practitioners and advocates to provide technical assistance; and (5) assisting researchers in developing research reports for consumers, family members, and practitioners involving consumers in their research.

ABLEDATA Database Program

Macro International, Inc.
8401 Colesville Road, Suite 200
Silver Spring, MD 20910-3319
abledata@macroint.com
http://www.abledata.com

Principal Investigator: Lynn Halverson, 301/572-0477 (V)
Public Contact: Katherine Belknap, 800/227-0216 (V); 301/608-8998 (V); 301/608-8912 (TTY); Fax: 301/608-8958

Project Number: HN96015001
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 96 $269,522; FY 97 $269,522; FY 98 $269,522

Abstract: This project maintains and expands the ABLEDATA database, develops information and referral services that are responsive to the special technology product needs of consumers and professionals, and provides the data to major dissemination points to ensure wide distribution and availability of the information to all who need it. The ABLEDATA database contains information on more than 24,000 assistive devices, both commercially produced and custom made. Requests for information are answered via telephone, mail, electronic communications, or in person.

National Rehabilitation Information Center (NARIC)

KRA Corporation
1010 Wayne Avenue, Suite 800
Silver Spring, MD 20910
modum@kra.com
http://www.naric.com/naric

Principal Investigator: Mark X. Odum
Public Contact: Information Specialists, 800/346-2742 (V); 301/562-2400 (V); 301/495-5626 (TTY); Fax: 301/562-2401

Project Number: HN970020
Start Date: February 1, 1997
Length: 22 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 97 $770,928; FY 98 $914,985
Abstract: The National Rehabilitation Information Center (NARIC) maintains a research library of more than 53,000 documents and responds to a wide range of information requests, providing facts and referral, database searches, and document delivery. Through telephone information referral and the Internet, NARIC disseminates information gathered from NIDRR-funded projects, other federal programs, and from journals, periodicals, newsletters, films, and videotapes. NARIC maintains REHABDATA, a bibliographic database on rehabilitation and disability issues, both in-house and on the Internet. Users are served by telephone, mail, electronic communications, or in person.

National Resource Center on Supported Living and Choice for People with Mental Retardation and Developmental Disabilities

Syracuse University
Center on Human Policy
805 South Crouse Avenue, Room 101
Syracuse, NY 13244-2280
thechp@sued.syr.edu
http://soeweb.syr.edu/thechp/nrc.htm

Principal Investigator: Steven J. Taylor, PhD, 315/443-3851
Public Contact: Bonnie Shoultz, Associate Director; Rachael A. Zubal, Information Coordinator, 315/443-3851 (V); 315/443-4355 (TTY); Fax: 315/443-4338

Project Number: H133A990001
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY98 $400,000

Abstract: This center conducts information dissemination, training, and technical assistance on community inclusion, with a specific focus on supported living and choice. The center identifies and documents innovative policies and practices for home ownership, self-directed support services, self-determination, self-advocacy, and community participation. Activities include the preparation of information materials for direct support staff, a national survey of state funding for supported living, a disability studies scholars program to encourage advanced students at Historically Black Colleges and Universities to pursue careers in disability-related fields, and increased efforts to address the needs of historically under represented groups. The center maintains an information clearinghouse on supported living and choice and disseminates resource material targeted to people with developmental disabilities, family members, professionals, direct services staff, policy makers and providers. The center supports academies sponsored by the President's Committee on Mental Retardation (PCMR) and offers assistance and support to Self Advocates Becoming Empowered, state and local providers, developmental disability councils, and protection and advocacy agencies. In providing technical assistance to states, the center coordinates its efforts with the National Home of Your Own Alliance and the Robert Wood Johnson Self-Determination Initiative, both at the University of New Hampshire.

National Center for the Dissemination of Disability Research (NCDDR)

Southwest Educational Development Laboratory (SEDL)
211 East Seventh Street, Suite 400
Austin, TX 78701-3281
lharris@sedl.org
http://www.ncddr.org

Principal Investigator: John D. Westbrook, PhD
Public Contact: Lin Harris, Information Assistant, 800/266-1832 (V/TTY); Fax: 512/476-2286

Project Number: H133D50016
Start Date: August 1, 1995
Length: 48 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 95 $500,000; FY 96 $500,000; FY 97 $540,739; FY 98 $559,986
Abstract: This project provides information and technical assistance to NIDRR grantees in identifying and improving dissemination strategies designed to meet the needs of their target audiences. The project also analyzes and reports on dissemination trends relevant to disability research. Task force and material development activities address multicultural factors that influence dissemination and utilization. This project conducts ongoing informational networking through a variety of approaches, including an interactive World Wide Web site highlighting events and other information about specific NIDRR grantees, the production of quarterly issues of *The Research Exchange* newsletter, and in-person and online technical assistance support.

Total Access: An Innovative System to Provide Destination Accessibility Information for Children and Adults with Disabilities

Meeting the Challenge, Inc.
3630 Sinton Road, Suite #103
Colorado Springs, CO 80907-5072
going@mtc-inc.com
http://www.mtc-inc.com

Principal Investigator: Patrick Going
Public Contact: 719/444-0252; Fax: 719/444-0269

Project Number: H133G80013
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 98 $124,917

Abstract: This project develops and tests the technical feasibility and merit of a system that provides access information about destinations in the Colorado area. Accessibility information about destinations is a critical issue for people with disabilities and their parents, teachers, and friends. When information is unavailable or inaccurate, many people with disabilities are restricted from participating in stimulating activities, especially those involving people without disabilities. Through the use of standardized documentation, a City-Line-like telephone audiotex service, and Internet Web sites, the design phase of this effort produces prototypes of destination access information for several locations. The project reviews a wide range of destination information sources to identify the elements described and types of information presented about each element. The project then develops a survey instrument to be completed by a number of requirements analysis teams, composed of people with disabilities, their associates, and destination site managers.

Illinois Joint Training Initiative on Disability and Abuse: Advocacy and Empowerment Through Knowledge Dissemination

University of Illinois/Chicago
Institute on Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
cedrum@uic.edu
http://www.uic.edu/depts/idhd

Principal Investigator: Charles Drum, JD, PhD
Public Contact: Michael Wonderlich, Project Coordinator, 312/413-8833; Fax: 312/413-2918

Project Number: H133G70124
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 97 $123,990; FY 98 $125,000

Abstract: This project provides information and skills to advocates, consumers, family members, service providers, and others to empower them to enforce the rights of adults with disabilities who have been abused or neglected. It is largely a training project whose objectives include: (1) developing interactive consumer-responsive materials that train consumers, family members, and service providers to recognize incidents; (2) making the social and legal system respond to cases; (3) providing referral to resources available for victims; (4) conducting state-wide training using the materials; (5) providing each training participant with the opportunity to become a local trainer on these issues; and (6) providing technical assistance, materials, and resources to local trainers hosting training events.

Developing the Capacity of Minority Communities to Promote the Implementation of the Americans with Disabilities Act

University of Illinois/Chicago
Institute on Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
fabricio@uic.edu; paml@uic.edu

Principal Investigator: Fabricio E. Balcazar, PhD, 312/413-1646
Public Contact: Pamela L. Block, PhD, 312/996-6824 (V); 312/413-0453 (TTY); Fax: 312/413-2918

Project Number: H133G80074
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $125,995
Abstract: This project develops, implements, and evaluates a comprehensive approach to enhancing the capacity of minority communities to further the implementation of the Americans with Disabilities Act (ADA). The project includes: (1) planning and organizing a coalition of representatives from local independent living centers and minority community members including people with disabilities, family members, and other service providers; (2) assisting the coalition in conducting participatory community needs assessments relevant to the ADA; (3) organizing town meetings to further illuminate perceived problems with implementation of the ADA; (4) setting goals and planning actions to address specific problems identified in the needs assessment process; and (5) providing feedback and technical support to coalitions in meeting their goals.

Knowledge Dissemination for Vision Screeners

University of Kansas
Institute for Life Span Studies
Parsons Research Center
2601 Gabriel Avenue
Parsons, KS 67357
chuck@ukans.edu

Principal Investigator: Charles R. Spellman, EdD
Public Contact: 316/421-6550, ext. 1890; Fax: 316/421-0954

Project Number: H133G60140
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 96 $126,548; FY 97 $124,613; FY 98 $124,613

Abstract: This project increases the quantity and quality of vision services available nationally to infants, toddlers, preschoolers, and older people with disabilities by disseminating an interactive CD-ROM program to providers of vision screening and evaluation services. The program also provides a model for using CD-ROM to disseminate "knowledge on demand" that can be readily delivered in a variety of settings. The model addresses the training needs of a variety of personnel regarding traditional vision screening services to people who are sometimes considered difficult to test, and as a consequence, often do not receive traditional vision screening services. The CD-ROM program is modeled after the "knowledge on demand" technology used in industry.

A Knowledge Dissemination Project to Enhance the Transfer of Rehabilitation Engineering and Assistive Technologies to People with Disabilities

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Cerebral Palsy Research Foundation of Kansas
5111 East 21st Street
Wichita, KS 67208
landers@southwind.net
http://www.cprf.org

Principal Investigator: Leonard Anderson
Public Contact: 316/688-1888; Fax: 316/651-5206

Project Number: H133G80077
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $124,999

Abstract: This project uses information dissemination mechanisms to expand the availability of assistive technologies that enrich the quality of life of people with disabilities. Goals of the project are: (1) to encourage technology originators and developers to disseminate information, and to facilitate dissemination actions regarding assistive devices and modifications to consumer technology; (2) to improve the quality and reliability of the design and fabrication of assistive devices; (3) to disseminate information about available products and technology to people with disabilities, family members, and professionals; (4) to facilitate better use of local resources for fabricating technology devices, with a focus on assistive technology devices; (5) to improve the usefulness and effectiveness of the devices; (6) to ensure that legal implications of providing engineering information on assistive technology devices are addressed in a satisfactory, cost-effective manner; and (7) to ensure that people with disabilities are involved in the project's activities and goals.

Development of a Consumer-Responsive Resource on Assistive Technology Information

Macro International, Inc.
11785 Beltsville Drive, #300
Calverton, MD 20705
lowe@macroint.com
http://www.macroint.com

Principal Investigator: Robert Gold; Lynn Halverson
Public Contact: Stephen Lowe, 301/572-0887; Fax: 301/572-0999

Project Number: H133G80048
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $124,969

Abstract: This project establishes "AT in the Media," a database of up-to-date resources on comparative assistive technology information. Since this project works in conjunction with the existing ABLEDATA project, consumers with disabilities can access the new database through the ABLEDATA Web site and through access to ABLEDATA information specialists. Sources for the database include articles from consumer-oriented periodicals, trade publications, and professional journals. Other multimedia resources are also abstracted. The resources are organized in two Web site areas called the Reading Room and AT Forum. To ensure that they meet consumer information needs about assistive technology, these areas are developed with consumer input and advice. In addition, two new Web-based resources are developed to enable consumers and service providers to obtain information from other consumers or experts.

Seeking, Screening, Evaluating, Describing, and Disseminating Approaches Used by Two-Year Colleges to Serve Rehabilitation Services Clients with Severe/Multiple Functional Limitations in Highly Effective Ways

University of Wisconsin/Madison
Center on Education and Work
964 Educational Sciences Building
1025 West Johnson Street
Madison, WI 53706
jgugerty@soemadison.wisc.edu
http://www.cew.wisc.edu/nidrr

Principal Investigator: John Gugerty
Public Contact: 608/263-2724; Fax: 608/262-3050

Project Number: H133G70073
Start Date: June 15, 1997
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $124,904; FY 98 $124,885

Abstract: This project improves the ability of two-year colleges to serve rehabilitation clients and other students with severe and multiple functional limitations by providing ready access to current, detailed descriptions of highly effective approaches other two-year colleges use to serve these populations. Community colleges and technical colleges offer opportunities for students to learn skills that pay a living wage, and they are the postsecondary education venue of choice for state and federal rehabilitation-services professionals when their clients' Individualized Written Rehabilitation Programs (IWRPs) call for skill training. This project serves rehabilitation professionals, parents, individuals with severe and multiple limitations, special educators, vocational educators, and regular educators who wish to: (1) address and solve the continuing unemployment and underemployment problems of individuals with severe/multiple functional limitations, and (2) strengthen the approaches used by two-year colleges to serve rehabilitation clients and other students with severe/multiple functional limitations. The project obtains information, synthesizes it, makes it widely and readily available in print, electronic, and other alternative formats, and provides training and technical assistance to individuals wishing to replicate or adapt these approaches.

ADA Training for State and Local Government ADA Coordinators and Policymakers

National League of Cities
1301 Pennsylvania Avenue Northwest, Suite 550
Washington, DC 20004

Principal Investigator: Renee Winsky, 202/626-3000 (V)
Public Contact: 202/626-3000 (V); 202/626-3045 (TTY); Fax: 202/626-3043

Project Number: H133D50011
Start Date: February 1, 1995
Length: 36 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 95 $249,975; FY 96 $175,504; FY 97 $187,104; FY 98 (No-cost extension through 3/31/99)
Abstract: This project increases voluntary compliance with the ADA among state and local government officials by equipping them with the information and skills they need to implement the ADA throughout their government entities. Training is targeted to state and local government ADA coordinators, senior department directors with management oversight, local elected officials, and the staffs of the state associations that directly serve local governments. A principal product of grant activities is the development of ADA training curricula specifically targeted to state and local government. These materials complement project training, enhance the usability of existing ADA materials, and target aspects of ADA compliance that are particular to experiences of state and local government. The National League of Cities (NLC) leads this training grant in partnership with the National Association of Counties (NACo) and the Council of State Governments (CSG); training sessions are offered at annual statewide meetings of State Municipal Leagues and State Associations of Counties, at regional workshops, national meetings of each partner association, and annual meetings of minority caucuses of NLC and NACo. The project is publishing a series of articles in association publications and providing ongoing technical assistance to state and local government officials and association members. The training and consulting firm ADA Vantage provides contract services to the partnership as part of the project.

The Americans with Disabilities Act Technical Assistance Coordinator (ADA-TAC) Contract

KRA Corporation
8455 Colesville Road, Suite 935
Silver Spring, MD 20910-3319
adatac@access.digex.net
http://www.adata.org

Principal Investigator: Carol J. Boyer
Public Contact: 301/587-3555 (V); 301/495-5626 (TTY); Fax: 301/587-1967

Project Number: HN96001001
Start Date: November 8, 1995
Length: 36 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 95 $274,802; FY 96 $290,455; FY 97 $306,538; FY 98 (No-cost extension through 2/28/99)

Abstract: This contract addresses the needs of businesses, the disability community, and state and local governments in implementing the ADA. The activities of the DBTACs and NTPs are promoted through a five-pronged campaign by using state-of-the-art electronic communication media as well as traditional media outreach. The project's Web site links to all of NIDRR's ADA Technical Assistance Programs' Web sites, ADA publications, *Federal Register* notices on the ADA and other disability-related topics, Department of Justice press releases on the ADA, key ADA federal agencies' Web sites, and other ADA-related Web sites. Also, the project facilitates DBTAC and NTP communication, disseminates DBTAC and federal agency materials, coordinates legal reviews of identified materials, and provides ADA information updates. The ADA-TAC facilitates and coordinates six Project Directors' meetings during the contract period. The comprehensive plan of this contract raises ADA awareness, executes ADA policies and procedures established by businesses, and upgrades public services with state and local governments.

The ADA National Access for Public Schools Project

Adaptive Environments Center, Inc.
374 Congress Street, Suite 301
Boston, MA 02210
adaptive@adaptenv.org
http://www.adaptenv.org

Principal Investigator: Elaine Ostroff
Public Contact: Kathy Gips, 800/893-1225, ext. 23 (V/TTY, Schools Hotline); 617/695-1225, ext. 28 (V/TTY); Fax: 617/482-8099

Project Number: H133D40019
Start Date: October 1, 1994
Length: 39 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 94 $250,000; FY 95 $288,192; FY 96 $250,000; FY 97 (No-cost extension through 6/30/98); FY 98 (No-cost extension through 2/28/99)
Abstract: This project builds and supports a national capacity to help school districts respond to the ADA. In a two-tiered training model undertaken in cooperation with the American Association of School Administrators and the American Association of Education Service Agencies, a national expert team delivers training to assist school systems in conducting the required self-evaluation and in implementing necessary changes. This team also trains and supports regional trainers that are available to school districts. With the regional DBTACs the project co-leads training programs for administrators as well as parent groups. A series of short fact sheets and a video are being produced for distribution through the DBTACs and Adaptive Environments. Programs initiated during the project term are designed to continue beyond the NIDRR funding period. Support efforts from Adaptive Environments include a toll-free Schools Hotline, an electronic mailing list, an Internet "ADA and the Public Schools" Web site, and nationally promoted audio teleconferences. All publications produced by the project are available in print, alternative formats, and through electronic media.

New England Disability and Business Technical Assistance Center - Region I

Adaptive Environments Center, Inc.
374 Congress Street, Suite 301
Boston, MA 02210
vfletcher@adaptenv.org
http://www.adaptenv.org

Principal Investigator: Valerie Fletcher, Project Director, 617/695-1225, ext. 26
Public Contact: 800/949-4232 (V/TTY in CT, ME, MA, NH, RI, and VT); 617/695-1225, ext. 31 (V/TTY); Fax: 617/482-8099

Project Number: H133D60015
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $499,830; FY 97 $538,400; FY 98 $520,000

Abstract: The New England DBTAC provides technical assistance, training, and information dissemination for Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont. The project's emphasis is on ensuring that the knowledge and skills to implement the ADA are infused within state and local organizations. Contracts with each state and with local independent living centers extend technical assistance capacity throughout the region. The DBTAC uses a toll-free telephone hotline, a World Wide Web site, electronic mailing lists, and audio teleconferencing to extend its reach throughout New England. The project places a strong emphasis on the training of trainers, and has established a Training and Technical Assistance Resource Center that supports trainers and technical assistance providers. A regional advisory board consists of representatives from each state, including centers for independent living, parent programs, seniors, businesses, and state and local governments, and provides guidance, helps prioritize the use of incentive grants, and evaluates DBTAC efforts.

Northeast Disability and Business Technical Assistance Center - Region II

United Cerebral Palsy Associations of New Jersey
354 South Broad Street
Trenton, NJ 08608
ucpanjdbtac@aol.com
http://disabilityact.com

Principal Investigator: Jennifer Eckel
Public Contact: Huntley Forrester, Project Director, 800/949-4232 (V/TTY, in NJ, NY, PR, and VI); 609/392-4004 (V); 609/392-7044 (TTY); Fax: 609/392-3505

Project Number: H133D60013
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $550,000; FY 97 $469,855; FY 98 $578,000
Abstract: The Northeast DBTAC provides technical assistance, training, and information dissemination for New Jersey, New York, Puerto Rico, and the Virgin Islands. In this collaborative effort, United Cerebral Palsy Associations of New Jersey functions as the lead agency, providing technical assistance, training, and information dissemination for New Jersey, and coordinating the activities of the satellite program. The satellites are: the New York State Office of Advocate for Persons with Disabilities, serving New York; the Asociacion de Padres Pro Bienestar de Niños con Impedimentos de Puerto Rico, serving Puerto Rico; and the Virgin Islands Family Information Network on Disabilities, serving the Virgin Islands. Cornell University School of Industrial and Labor Relations provides training services and management support for the DBTAC in Region II.

Mid-Atlantic Disability and Business Technical Assistance Center - Region III

TransCen, Inc.
451 Hungerford Drive, Suite 607
Rockville, MD 20850
adainfo@transcen.org
http://www.adainfo.org

Principal Investigator: Marian S. Vessels, Project Director
Public Contact: 800/949-4232 (V/TTY in DC, DE, MD, PA, VA, and WV); 301/217-0124 (V/TTY); Fax: 301/217-0754

Project Number: H133D60006
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $575,000; FY 97 $578,000; FY 98 $578,000
Abstract: The Mid-Atlantic DBTAC provides technical assistance, training, and information dissemination for Delaware, the District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia. It focuses on two major initiatives to implement the ADA effectively: (1) increasing the capacity of state and local organizations to implement the ADA by developing six ADA coalitions, made up of employers, people with disabilities, nonprofit organizations, state and local governments, independent living centers, and other covered entities to provide technical assistance, coordinate training, disseminate information, and promote awareness of the ADA on the local level; and (2) providing a wide range of technical assistance services, training, information, and information dissemination to individuals and entities with responsibilities and rights under the ADA.

ADA Technical Assistance Projects
Region IV - AL, FL, GA, KY, MS, NC, SC, and TN

Southeast Disability and Business Technical Assistance Center - Region IV

United Cerebral Palsy Associations, Inc.
490 - 10th Street, First Floor
Atlanta, GA 30318
se-dbtac@mindspring.com
http://www.sedbtac.org

Principal Investigator: Shelley Kaplan, 404/385-0634
Public Contact: 800/949-4232 (V/TTY, in AL, FL, GA, KY, MS, NC, SC, and TN); 404/385-0636 (V/TTY); Fax: 404/385-0641

Project Number: H133D60018
Start Date: November 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $650,000; FY 97 $709,031; FY 98 $739,000
Abstract: The Southeast DBTAC provides technical assistance, training, and information dissemination for Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee. The DBTAC: (1) facilitates timely access to information and technical assistance by establishing a regional and state presence on the Internet, including bulletin boards, listserv mailing lists, and a Web page; (2) enhances the capacity of DBTAC state affiliates by continuing to assist in maintaining and updating their libraries of ADA-related resource materials, and by establishing an instate mentoring program for co-training and assistance in developing ADA awareness within locales; (3) facilitates state linkages among groups protected by the ADA and entities with responsibilities under the ADA, resulting in effective ADA implementation over the long term; and (4) expands outreach to people with and without disabilities who are from minority backgrounds. VISTA volunteers in two states are initiating and coordinating outreach activities to African American, Asian, and Hispanic communities, and an information initiative in all eight states is targeted to minority-owned businesses as well as to community organizations, networks, and media serving various ethnic populations.

Great Lakes Disability and Business Technical Assistance Center - Region V

University of Illinois/Chicago
Institute on Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
gldbtac@uic.edu
http://www.gldbtac.org

Principal Investigator: David Braddock, PhD, 312/413-1647
Public Contact: Robin Jones, Project Director, 800/949-4232 (V/TTY, in IL, IN, MI, MN, OH, and WI); 312/413-1407 (V/TTY); Fax: 312/413-1856

Project Number: H133D60011
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $700,000; FY 97 $738,018; FY 98 $778,000
Abstract: The Great Lakes DBTAC provides technical assistance, training, and information dissemination for Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin. GLDBTAC has developed standing ADA Committees in each state that represent the business community, government agencies, disability rights groups, and other interested parties. These committees share their successes with one another, encouraging cross-promotion and regionwide implementation of the programs that have the greatest impact. The members of these committees also serve as a referral network that can be called upon to address local issues. The state ADA Committees conduct training conferences, provide technical support, and address ADA needs that are unique to each state. GLDBTAC disseminates updated information regarding implementation of the ADA to interested parties throughout the region via its quarterly newsletter, *Region V News*, in order to increase knowledge and awareness of the law. The project also stresses the identification and diffusion of innovative ADA ideas used by businesses and other agencies to assist with ADA implementation issues. This effort promotes creative and cost-effective compliance strategies while reinforcing the idea that meeting the ADA requirements does not always have to be complicated or expensive.

Southwest Disability and Business Technical Assistance Center - Region VI

The Institute for Rehabilitation and Research (TIRR)
Independent Living Research Utilization (ILRU)
2323 South Shepherd Boulevard, Suite 1000
Houston, TX 77019
lfrieden@ilru.org
http://www.ilru.org

Principal Investigator: Lex Frieden
Public Contact: Wendy Wilkinson, Project Director, 800/949-4232 (V/TTY, in AR, LA, NM, OK, and TX); 713/520-0232 (V); 713/520-5136 (TTY); Fax: 713/520-5785

Project Number: H133D60012
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $550,000; FY 97 $550,000; FY 98 $600,000
Abstract: The Southwest DBTAC provides technical assistance, training, and information dissemination for Arkansas, Louisiana, New Mexico, Oklahoma, and Texas. The DBTAC is based at Independent Living Research Utilization (ILRU), a program of The Institute for Rehabilitation and Research (TIRR) in Houston Texas. The DBTAC carries out its activities with the assistance of a number of affiliated organizations in all the states it serves. Ongoing activities of the DBTAC include ADA outreach to Hispanic individuals. DBTAC affiliates include Centers for Independent Living in each state, the Consumer Education Foundation of the Better Business Bureau in Austin Texas, the Center for Health Policy and Law at the University of Houston, and the Regional Rehabilitation Continuing Education Program (RRCEP).

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Great Plains Disability and Business Technical Assistance Center - Region VII

University of Missouri/Columbia
100 Corporate Lake Drive
Columbia, MO 65203
adalh@showme.missouri.edu
http://www.adaproject.org

Principal Investigator: David Roberts, Project Director; Jim de Jong, Project Co-Director, 573/882-3807 (V)

Public Contact: 800/949-4232 (V/TTY in IA, KS, MO, and NE); 573/882-3600 (V/TTY); Fax: 573/884-4925

Project Number: H133D60004
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $500,000; FY 97 $535,000; FY 98 $535,000

Abstract: The Great Plains DBTAC provides technical assistance, training, and information dissemination for Iowa, Kansas, Missouri, and Nebraska. It has established working relationships with five separate state affiliates who assist with the mission and objectives of the overall project. Seventy-five state advisory council members provide direction, feedback, and assistance to the regional office and state affiliates, and forty-five local community-based organizations assist with local capacity building and the provision of direct ADA services within their service areas. This cooperative partnership produces a circle of dissemination and feedback ensuring customer-oriented responsiveness by the Great Plains DBTAC. The regional office directs the project by coordinating and supporting the activities of the state affiliates and the state advisory councils and by disseminating information throughout the Region VII network. Local capacity-building efforts are promoted by the Great Plains DBTAC regional office working cooperatively with state affiliates, state advisory councils, and local community-based organizations. Distribution of materials occurs through mailings, via the electronic bulletin board system, and during training sessions.

Rocky Mountain Disability and Business Technical Assistance Center - Region VIII

Meeting the Challenge, Inc.
3630 Sinton Road, Suite 103
Colorado Springs, CO 80907-5072
endrphn@mtc-inc.com
http://www.ada-infonet.org

Principal Investigator: Joyce Maynard Hume, Project Director
Public Contact: 800/949-4232 (V/TTY, in CO, MT, ND, SD, UT, and WY); 719/444-0268 (V/TTY); Fax: 719/444-0269

Project Number: H133D60010
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $512,997; FY 97 $616,754; FY 98 $646,754
Abstract: The Rocky Mountain DBTAC provides technical assistance, training, and information dissemination for Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming. The project includes a centralized InfoCenter that serves as a clearinghouse, a network of experts qualified to provide assistance, and linkages with groups who have rights and responsibilities under the ADA. Information is disseminated through databases, direct mail, a newsletter, the general media, and the telephone.

Pacific Disability and Business Technical Assistance Center - Region IX

Public Health Institute
2168 Shattuck Avenue, Suite 301
Berkeley, CA 94704-1307
adatech@pdbtac.com
http://www.pacdbtac.org

Principal Investigator: Erica C. Jones, Project Director, 510/848-2980 (V); 510/848-1840 (TTY)
Public Contact: 800/949-4232 (V/TTY, in AZ, CA, HI, NV, and the Pacific Basin); Fax: 510/848-1981

Project Number: H133D60016
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $650,000; FY 97 $753,682; FY 98 $737,789
Abstract: The Pacific DBTAC provides technical assistance, training, and information dissemination for Arizona, California, Hawaii, Nevada, and the Pacific Basin. The DBTAC coordinates and conducts regional conferences, individual state and local training sessions, and workshops about the provisions of the ADA. The Center also works to increase the level of local entities' capacities to provide expertise to ensure that implementation of the ADA occurs. The Pacific DBTAC engages in minority outreach and training, and uses electronic distance learning techniques to reach underserved geographic locations. The current network of affiliates is being expanded to enhance local capacity through a home page on the World Wide Web and by creating partnerships with business, state and local government agencies, and people with disabilities. By increasing awareness in the region through a comprehensive marketing and communications plan, the project is fulfilling the NIDRR DBTAC priorities.

Northwest Disability and Business Technical Assistance Center - Region X

Washington State Governor's Committee on Disability Issues and Employment
P.O. Box 9046, MS 6000
Olympia, WA 98507-9046
krutherford@esd.wa.gov
http://www.wata.org/NWD

Principal Investigator: Toby Olson, Project Director
Public Contact: 800/949-4232 (V/TTY, in AK, ID, OR, and WA); 360/438-4116 (V/TTY); Fax: 360/438-3208

Project Number: H133D60009
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $512,500; FY 97 $484,322; FY 98 $533,345
Abstract: The Northwest DBTAC provides technical assistance, training, and information dissemination for Alaska, Idaho, Oregon, and Washington. A subcontract has been established with a consumer-controlled, community-based organization in each of the states in Region X. The activities of the project are directed toward augmenting community capacities, and the existing organizational structures found within those communities are the avenues through which the project does much of its work. The project maintains a central clearinghouse and a toll-free number for information, technical assistance, and referral to national, regional, state, and local resources. The clearinghouse provides callers with an appropriate range of options and links them with individuals in their community who have gained expertise in the caller's area of concern.

Small Business Innovative Research (SBIR Phase I)
California

Accessible Braille Reference Materials on CD-ROM and on the World Wide Web

Opus Technologies
13333 Thunderhead Street
San Diego, CA 92129-2329
opus@opustec.com
http://www.opustec.com

Principal Investigator: Samuel O. Flores
Public Contact: 619/538-9401; Fax: 619/538-9401

Project Number: ED-98-PO-3716
Start Date: September 1, 1998
Length: 6 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 98 $50,000

Abstract: This project assists braille transcribers, proofreaders, and readers by determining the feasibility of using Microsoft's new HTML Help technology for developing materials that can be accessed from both Windows and Macintosh computers. Standard reference and instructional books for transcribing printed materials into braille are currently available only in hardcopy print and braille editions, which are bulky, hard to keep up-to-date, and difficult to search through, especially for readers who are blind. The project develops a prototype version of the code book *English Braille: American Edition, 1994* on CD-ROM and on a Web site and posts a simulated braille font on the Web site in order to speed up the display of braille character examples and simplify the authoring tasks for Web site content providers.

Small Business Innovative Research (SBIR Phase II)
California

Trails Web Site with Universal Access Information

Beneficial Designs, Inc.
5858 Empire Grade
Santa Cruz, CA 95060
mail@beneficialdesigns.com
http://www.beneficialdesigns.com

Principal Investigator: Peter W. Axelson; Denise A. Chesney
Public Contact: 831/429-8447; Fax: 831/423-8450

Project Number: ED-98-CO-0046
Start Date: October 1, 1998
Length: 24 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $125,000

Abstract: This project develops the Trails Web site to provide universal access information for trails throughout the United States, making the site useful to all hikers, regardless of their ability. The Universal Trails Assessment Process enables trail managers to assess specific trails objectively with regard to grade, cross slope, width, surface characteristics, and obstacles. The collected trail data is processed to create Trail Access Information in a format similar to a Nutrition Facts food label. The Trails Web site contains Trail Access Information on numerous hiking trails and allows users to search for trails that meet their specific access needs.

Small Business Innovative Research (SBIR Phase II)
Kentucky

The Adaptive Device Locator System on the World Wide Web

Academic Software, Inc.
331 West Second Street
Lexington, KY 40507
asistaff@acsw.com
http://www.acsw.com/adlsweb1.html

Principal Investigator: Warren E. Lacefield, PhD
Public Contact: 606/233-2332; Fax: 606/231-0725

Project Number: RW980370
Start Date: October 1, 1998
Length: 24 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $125,000

Abstract: This project moves the Adaptive Device Locator System (ADLS), a unique and valuable national resource, by transforming the entire Locator System database content and program code into a World Wide Web site on the Internet. The planned format is universally accessible to teachers, health professionals, and consumers with disabilities. The finished site lists computer access products that companies provide; vendor links allow ADLS visitors to jump directly to other commercial sites once appropriate assistive technology devices are located. ADLS on the Web focuses on international trade and hopes to be an export leader. It also features monthly infomercials, new product announcements, and other information of interest to consumers.

Capacity-Building for Rehabilitation Research and Training

NIDRR funding for capacity building supports advanced instruction for researchers and service providers, and training for consumers in applications of new research and technology. This involves training researchers across disciplines, training rehabilitation practitioners and service providers to use research-generated knowledge and new techniques; and training consumers to participate in research efforts.

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Technical Support for Computer and Other Related Activities

Conwal, Inc.
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McLean, VA 22101
headquarters@conwal.com

Principal Investigator: Shelia Newman
Public Contact: 703/448-2300 (V); 703/448-3079 (TTY); Fax: 703/448-3087

Project Number: ED-98-CO-0004
Start Date: January 9, 1998
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 98 $500,000
Abstract: This project provides technical support to NIDRR for computer-based and other related activities. Activites include data collection and tabulation, database and management information system development, statistical analyses, literature reviews, small surveys, and focus group meetings. Active projects involve analysis and design of a management information system for NIDRR, focus groups for planning the research agenda, and electronic dissemination.

Empowerment for People with Disabilities: A Study of Civic Participation in Community Life

Kay Schriner, PhD
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Fayetteville, AR 72701
kays@comp.uark.edu
http://www.uark.edu/dispol

Principal Investigator: Kay Schriner, PhD
Public Contact: 501/575-6417; Fax: 501/575-3253

Project Number: H133F80030
Start Date: August 17, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $55,000

Abstract: This project studies the civic participation of people with disabilities by conducting a secondary data analysis of information. Researchers have established three broad categories of participation: individual resources such as education and income, institutional factors such as recruitment by candidates, and systemic variables such as state-level election laws. However, only a handful of studies have addresses the electoral participation of people with disabilities. This project contributes to this knowledge base by conducting secondary data analyses of several large national datasets. These analyses are used to help to establish the psychological, attitudinal, physical, and policy barriers that inhibit or promote electoral participation by people with disabilities.

Handicapped Morality: Abandoning Persons with Disability to the Perils of the Healthcare Marketplace

John D. Banja, PhD
Emory University
Center for Rehabilitation Medicine
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Atlanta, GA 30322
jbanja@emory.edu

Principal Investigator: John D. Banja, PhD
Public Contact: 404/712-4804; Fax: 404/712-5895

Project Number: H133F80025
Start Date: September 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $55,000

Abstract: This project augments research already completed toward writing a book entitled *Handicapped Morality: Abandoning Persons with Disability to the Perils of the Healthcare Marketplace.* The book's central thesis is that examining the marketplace theory of health care allocation from a moral perspective is essential, and that such an examination reveals that the marketplace approach proves categorically disastrous to persons with a disability or chronic illness. The project proposes to deal with the issues involved through a review of the literature of ethics, health care economics, and rehabilitation outcomes in order to: (1) provide a moral analysis of the ideological tenets of economic libertarianism; (2) discuss how the principles of fairness and opportunity from a legal and civil rights perspective are violated by marketplace approaches to health care distribution; and (3) offer suggestions with respect to a "socially responsible" managed care system through analyzing the moral ideologies underlying insurance practices in other industrially advanced countries as compared to those in the United States.

Fellowships (Distinguished)
Illinois

Developing Strategies for the Challenges of Everyday Life

Gary L. Albrecht, PhD
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Northbrook, IL 60062
garya@uic.edu

Principal Investigator: Gary L. Albrecht, PhD
Public Contact: 312/996-5765; Fax: 847/205-9883

Project Number: H133F80021
Start Date: August 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $55,000

Abstract: This project examines the daily lives of people with disabilities to find out what is meaningful to them, how they organize their lives, and how they develop strategies to deal with the larger issues and hassles of everyday life. The research focuses on both people with disabilities who have easy and ready access to comprehensive health and rehabilitation services and those who have difficulty accessing and/or remaining in the system. The purpose of the study is to let people with disabilities speak about their lives, the critical issues and barriers they face, their needs, the tools they have developed to make their lives work, and how they enrich their lives. Based on these data, the fellow keeps the voice of people with disabilities in developing and analyzing a set of strategies that they have found to be effective and useful in dealing with the obstacles and uncertainties of daily life. The work develops a strategic action plan based on personal experiences and on behavioral science theory that captures how people with disabilities create strategies and action plans that help them live organized and full lives.

Early Intervention in Europe: A Comparative Study of Methodologies and Practice

James Allen Blackman, MD, MPH
955 Emerson Drive
Charlottesville, VA 22901
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Principal Investigator: James Allen Blackman, MD, MPH
Public Contact: 804/982-1676

Project Number: H133F80004
Start Date: July 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $55,000
Abstract: This fellowship supports a comparative study of early intervention philosophy and practice in selected European countries with diverse political, cultural, social, and economic orientations, with special emphasis on Great Britain. Scientific evaluation of these practices is beyond the scope of this study; however, knowledge of these practices is expanded with detailed descriptions of the methodologies and practice of early intervention in other countries. The advantages of U.S. practices are confirmed, previously unknown or unappreciated methods are more thoroughly examined, and further research can follow. The focus is on interventions for infants and toddlers with severe or multiple disabilities and on novel interventions for these children and their families that are currently unavailable in the United States.

Fellowships (Distinguished)
Washington

Physiological Effects of Hydrotherapy for Preterm Neonates in Neonatal Intensive Care Units

Jane K. Sweeney, PhD, PT, PCS
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Gig Harbor, WA 98335-6015
apgar10@harbornet.com

Principal Investigator: Jane K. Sweeney, PhD, PT, PCS
Public Contact: 253/265-3866; Fax: 253/265-3867

Project Number: H133F80038
Start Date: September 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $55,000

Abstract: In this project, neonatal hydrotherapy for preterm infants in a neonatal intensive care setting is investigated according to physiological responses and feeding proficiency with comparison among two preterm infant groups: developmentally at-risk and typically developing infants. This project incorporates new technology in continuous physiological recording with the use of the Gould TA 5000 multichannel recorder for simultaneous, computerized measurement of heart rate, blood pressure, intracranial pressure, oxygen saturation, and temperature. Post-hydrotherapy feeding measures are duration and volume of oral feeding. The goals of this research are to influence caregiving practices in neonatal intensive care units for preterm neonates at risk for cerebral palsy and to establish a research framework for future systematic analyses of the effects of common neonatal physical therapy procedures.

Evaluation of a Novel Pre-Impregnated Carbon Composite Material and a Promising New Method of Custom-Fitting Modular Ankle-Foot Orthoses

Adrian A. Polliack, PhD
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http://www.ranchorep.org

Principal Investigator: Adrian A. Polliack, PhD
Public Contact: 562/401-7994; 310/445-6447; Fax: 562/803-6117

Project Number: H133F80013
Start Date: June 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $45,000

Abstract: This project explores the use of pre-impregnated (prepreg) carbon composite material as a novel alternative in fabricating ankle-foot orthoses (AFOs), and investigates a promising method of custom-fitting modular AFOs. Existing AFO technology, commonly made of molded thermoplastics, may lack strength and control when used by some people with disabilities, such as children with myelomeningocele, a severe form of spina bifida. The prepreg AFO fabrication process eliminates some of the traditional problems of composite AFO manufacturing, including noxious smells, bulkiness, and cost of labor and materials. The use of this material may allow for stronger and lighter AFOs. The possibility of fabricating AFOs in a partially cured state may allow orthotists to custom-shape to the patient's needs. Testing of prepreg AFOs consists of mechanical strength, stiffness, and fatigue analysis using test coupons and AFOs. Healthy AFO wearers evaluate AFOs and offer design, comfort, and safety critiques. Both mechanical and subject tests employ changes in thickness, orientation, and geometry of materials. Additionally, computer modeling is used in an effort to assess dynamic behavior differences with varying AFO designs and geometry.

How Students Prepare for Adult Life as They Leave High School

Jean Whitney-Thomas, PhD
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Children's Hospital
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Principal Investigator: Jean Whitney-Thomas, PhD
Public Contact: 617/355-8022; Fax: 617/355-7940

Project Number: H133F80016
Start Date: August 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $45,000

Abstract: This project conducts a qualitative and quantitative study to determine the clarity of post-school visions, students' own roles in creating that vision, and an understanding of their self-determination. The qualitative study follows five students with disabilities and five students without disabilities, all from Malden Massachusetts, as they prepare to leave high school. The quantitative study surveys high school juniors and seniors, with and without disabilities, to learn what they envision for the future, who and what influences their vision, and what self-directed action they take in making their vision a reality.

A Nationwide Assessment of Multicultural Counseling Competencies of Rehabilitation Practitioners in the Private Sector

Kellie Kirksey
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Boardman, OH 44512
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Principal Investigator: Kellie Kirksey
Public Contact: 330/726-2049; Fax: 330/726-3309

Project Number: H133F80034
Start Date: July 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $45,000

Abstract: This study assesses the multicultural competencies of rehabilitation service providers in the private sector nationwide. It is designed as descriptive, quantitative survey research. Multicultural counseling competencies involve possessing an appropriate level of skills, knowledge, awareness and relationship building abilities as it relates to working with individuals outside of one's own cultural group. The target population is the 1997 membership of the National Association of Rehabilitation Professionals in the Private Sector. With the full support of NARPPS, 500 subjects were randomly selected from a population of 3,000. As an incentive to participate in this research, individuals receiving the multicultural counseling competency questionnaire had their names entered into a drawing to receive a complimentary registration to the 1997 NARPPS convention. The dependent variable for this study was multicultural counseling competence. The subject's level of multicultural competence was assessed using the Multicultural Counseling Inventory; a demographic form and the Marlow Crowne Social Desirability scale was used as well. Independent variables included gender, race, age, educational level, number of multicultural counseling courses taken, number of continuing education courses in diversity, length of experience as a rehabilitation service provider, geographic location of current practice, perception of importance of multicultural training, and perceived academic preparation to work with people from other cultural groups.

Fellowships (Merit)
Pennsylvania

A Qualitative Survey of Consumers of Mental Health Services About Their Employment and Rehabilitation Experiences

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Philadelphia, PA 19118
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Principal Investigator: Richard C. Baron
Public Contact: 215/248-9504; Fax: 215/248-9507

Project Number: H133F80011
Start Date: September 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $45,000

Abstract: This project undertakes a qualitative analysis of the long term career patterns of people with serious mental illness in the competitive labor market, providing an opportunity for the experiences of consumers of mental health services to affect the rehabilitation programs and public policies that affect their careers. The study focuses specifically on the strategies used by people who attempt to sustain a career over twenty years or more despite continuing mental illness. The study uses a rigorous qualitative design to: (1) develop central research questions; (2) select a sample of respondents; (3) complete 50 in-depth, semi-structured interviews and 5 focus group discussions with consumers of mental health services; (4) complete analysis of the resulting data, through cooperation with representatives of key constituencies; (5) develop a final report on the study findings and a series of case studies; and (6) undertake dissemination of the study's reports to the mental health consumer, family, provider, advocacy, policy, and research communities.

Comparison of Activity Levels Between Adults With and Without Mental Retardation

Georgia C. Frey, PhD
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http://www.hlkn.tamu.edu

Principal Investigator: Georgia C. Frey, PhD
Public Contact: 409/862-3228; Fax: 409/847-8987

Project Number: H133F80012
Start Date: September 1, 1998
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $45,000
Abstract: This study assists agencies and health care providers in developing policies and strategies that promote physical activity in adults with disabilities by assessing activity levels and factors that influence physical activity of adults with and without mental retardation. Very little research of physical activity levels of people with mental retardation has been conducted, but it is suspected that these individuals who reside in the community lead an inactive life style. In this project approximately 30 individuals with mild or moderate mental retardation are recruited from agencies that provide job training placement, housing, or related services to people with disabilities; an equal number of participants without mental retardation are recruited from the community. All participants wear a small electronic device that monitors their activity levels and energy expenditure for a period of seven consecutive days. Information regarding the factors that influence physical activity are then gathered through interviews and journal keeping. Study findings are disseminated to a wide array of audiences.

The Ed Roberts Fellowships in Disability and Rehabilitation Research

University of California/Berkeley
School of Public Health
410 Warren Hall
Berkeley, CA 94720-7360
len-duhl@socrates.berkeley.edu; devva@wid.org

Principal Investigator: Len Duhl, MD, 510/642-1715 (V)
Public Contact: Devva Kasnitz, Project Manager, 510/251-4348 (V, WID); 510/208-9493 (TTY, WID); Fax: 510/763-4109 510/643-6981 (Duhl)

Project Number: H133P50005
Start Date: April 1, 1995
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 95 $149,900; FY 96 $149,900; FY 97 $149,000; FY 98 (No-cost extension through 8/31/98)
Abstract: The Fellowships program supports the career development and professional research of promising leaders in the field of disability and rehabilitation research with an emphasis on personal, sociocultural, and environmental urban issues. The definition of disability for this project is very broad. Through a combination of academic coursework, collaborative and independent research projects, community collaboration, and internships and mentor relationships, fellows have the opportunity to develop new skills and knowledge in disability studies and independent living research, including qualitative, quantitative, and applied research methods and approaches that substantially involve members of the study population. The program supports a graduate and an undergraduate course team taught by project faculty and fellows.

Interdisciplinary Research Training in Rehabilitation Technology

Applied Science and Engineering Laboratories
University of Delaware
duPont Hospital for Children
1600 Rockland Road
P.O. Box 269
Wilmington, DE 19899
foulds@asel.udel.edu
http://www.asel.udel.edu

Principal Investigator: Richard A. Foulds, PhD
Public Contact: Julia Mercier, 302/651-6799 (V); 302/651-6834 (TTY); Fax: 302/651-6895

Project Number: H133P30003
Start Date: January 1, 1993
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 93 $175,000; FY 94 $175,000; FY 95 $175,000; FY 96 $175,000; FY 97 $175,000; FY 98 (No-cost extension through 12/31/98)
Abstract: Individuals who have received a doctorate in a scientific or clinical field are accepted into this training program and participate in research activities that enhance their research skills. These, in turn, strengthen the national effort to establish a comprehensive service-delivery system that meets the needs of people with disabilities. Each fellow identifies an individual research project, participates with the Applied Science and Engineering Laboratories (ASEL) research team, and participates in both laboratory and clinical experiences. The project also allows for visiting scholars, travel by fellows to major professional and regional meetings, and publication of research findings. At the end of their training in rehabilitation, the fellows are assisted by ASEL staff in securing employment in a clinical or educational setting.

Advanced Rehabilitation Research Training Project in Rehabilitation Services Research

Northwestern University
Rehabilitation Institute Research Corporation
Rehabilitation Services Evaluation Unit
345 East Superior Street
Chicago, IL 60611
a-heinemann@nwu.edu
http://www.rseu.nwu.edu

Principal Investigator: Allen W. Heinemann, PhD
Public Contact: 312/908-2802; Fax: 312/908-4572

Project Number: H133P80014
Start Date: May 1, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $150,000

Abstract: This project develops a five-year fellowship program in rehabilitation service research at Northwestern University's Department of Physical Medicine and Rehabilitation. It uses available expertise and collaborators to train postdoctoral fellows in rehabilitation health services research. Over two years the program includes course work, a practicum, original research, and grant writing. Fellows new to health services research have six core courses, as well as the four-to-five additional courses for all fellows. The first year concentrates on beginning Masters in Public Health (MPH) courses. The second year includes intermediary MPH course work plus electives. Each fellow is expected to develop an individual research project by the end of the first training year and a publishable article by the end of the second year in addition to submitting at least one grant application related to the research activity.

Rehabilitation Research Training Program

University of Kansas
Beach Center on Families and Disability
Special Education Department
3111 Haworth Hall
Lawrence, KS 66045
ann@dole.lsi.ukans.edu
http://www.lsi.ukans.edu/beach/beachhp.htm

Principal Investigator: Ann Turnbull, EdD
Public Contact: 913/864-7608; Fax: 913/864-5825

Project Number: H133P70004
Start Date: July 1, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $150,000; FY 98 $150,000
Abstract: Over a five-year period this project increases the quantity of new post-doctoral and doctoral researchers and ensures their competency along family-systems, life-span, and multicultural dimensions. Focusing on families whose members have disabilities, the scholars become capable of conducting independent research related to: (1) the families studied; (2) rehabilitation and special education agencies, systems, and processes; and (3) families and individuals from culturally and linguistically diverse backgrounds who are served by those systems. The post-doctoral fellows collaborate with faculty from the Beach Center, Special Education Department, and other faculty in learning and conducting disability and family research for a full year. The doctoral trainees take their PhD degrees in special education, majoring in family and disability studies and minoring in research methodologies.

The Development, Implementation, and Evaluation of a Research Training Program in Psychiatric Rehabilitation

Boston University
Sargent College of Health and Rehabilitation Services
Center for Psychiatric Rehabilitation
930 Commonwealth Avenue
Boston, MA 02215
erogers@bu.edu
http://web.bu.edu/SARPSYCH

Principal Investigator: Sally E. Rogers
Public Contact: 617/353-3549 (V); Fax: 617/353-7700

Project Number: H133P70014
Start Date: March 1, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $147,489; FY 98 $147,489
Abstract: In this program, six individuals who possess doctoral-level clinical training are recruited and provided with a broad-based, intensive 27-month training fellowship in rehabilitation research. To provide an optimal training experience, three fellows are in residence at a time. Each fellow gains competency in the following areas: psychiatric rehabilitation, research design/methodology, statistics, consumer issues (as they relate to applied research), the conduct of applied rehabilitation research, computer literacy, and grant and professional writing.

The UMMC/MSU/AACIL Research Training Model

University of Michigan
Department of Physical Medicine and Rehabilitation Medicine
Rehabilitation Psychology
1H241 - University Hospital
1500 East Medical Center Drive
Ann Arbor, MI 48109-0050
dgtate@umich.edu

Principal Investigator: Denise G. Tate, PhD
Public Contact: 734/936-7052; Fax: 734/936-7048

Project Number: H133P30006
Start Date: September 1, 1993
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 93 $175,000; FY 94 $218,767; FY 95 $175,000; FY 96 $175,000; FY 97 $175,000; FY 98 (No-cost extension through 3/31/99)
Abstract: Emphasizing the participatory action research (PAR) process, this multidisciplinary research training program in disability, independent living, and rehabilitation draws upon faculty and resources from both universities and the AACIL to train postdoctoral-level professionals in rehabilitation research issues and methodologies. The program focuses on training related to applied research to provide information that improves the lives of people with disabilities. It also focuses on fundamental research designed to go beyond the immediate applied focus and produce generalizable new information and knowledge contributing to relevant theory development in rehabilitation.

Research Enrichment Program for Physiatrists

University of Missouri/Columbia
Research Enrichment Program
MA427 Health Sciences Center
One Hospital Drive, UMC
Columbia, MO 65212
koch.kathleen@columbia-mo.va.gov
http://www.hsc.missouri.edu/~rep

Principal Investigator: Jerry C. Parker, PhD, 573/814-6480
Public Contact: Kathleen Koch, 573/882-1632; Fax: 573/884-4188

Project Number: H133P80009
Start Date: April 1, 1998
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 98 $150,000
Abstract: This project trains 30 physiatry residents and junior faculty in the basic methodological skills and academic values required to conduct independent research projects. Participants in enrichment programs travel periodically to a central location (or locations) to receive intensive enrichment experiences. Participants are carefully mentored through the successive steps required for an independent research project. Through the use of carefully designed teaching modules and individualized instruction, ten participants per year are guided through the steps of an independent research project, including understanding research design, developing skills for statistical collaboration, preparing research manuscripts, presenting at scientific meetings, understanding peer review procedures, and applying for extramural funds. Scholarships are used to cover travel expenses for participants, and research accounts are used to defray the expenses associated with data collection. Over the course of one year, participants travel to six centralized training locations. Participants are required to plan and implement a thesis-like project in their home institutions and to present their research findings.

Advanced Multidisciplinary Training Program in Rehabilitation Outcomes Research

University of Medicine and Dentistry of New Jersey Medical School
Department of Physical Medicine and Rehabilitation
150 Bergen Street
Newark, NJ 07103
mark_v_johnston@compuserve.com

Principal Investigator: Mark Johnston, 973/731-3600, ext. 4736
Public Contact: Fax: 973/414-4738

Project Number: H133P70011
Start Date: March 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $149,608; FY 98 $149,000

Abstract: Outcomes research designates a group of interrelated scientific methodologies and domains of knowledge that address issues of the effectiveness and cost-effectiveness of rehabilitation in practice. This project redesigns the research training program to address the scientific basis of patient outcomes and the effectiveness of rehabilitation in practice. Three areas of research and training, each with several specific training tracks under experienced research mentors, include: (1) general outcomes and rehabilitation services research, including functional assessment, practice guidelines, disability economics, health policy, and disability sociology; (2) studies of community intervention programs, including outpatient clinics, primary care, independent living programs, geriatric rehabilitation, and alternative medicine; and (3) medical and neuropsychological outcomes research, involving study of specific pathologies or interventions and their relationships to functional outcomes. The program provides advanced research training to three or more PhD or MD fellows each year, usually for a 2-year term; a predoctoral student at the dissertation level may also be supported. The program is multidisciplinary, including all of the major disciplines associated with rehabilitation and with outcomes research.

Research Training in Rehabilitation Science with Special Emphasis on Disability Studies

University of Pittsburgh
School of Health and Rehabilitation Sciences
Dean's Office, 4029 Forbes Tower
Pittsburgh, PA 15260
cliffb+@pitt.edu
http://www.shrs.upmc.edu/phdprog/research%20opportunity.html
http://www.shrs.upmc.edu/phdprog/fellowshipsum.html

Principal Investigator: Clifford Brubaker, PhD
Public Contact: 412/647-1261; Fax: 412/647-1255

Project Number: H133P70013
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 97 $141,327; FY 98 $147,327
Abstract: This program provides a plan for research training in the emerging academic discipline of rehabilitation science. The program is based on a multidisciplinary approach to the study of topics and issues of relevance to people with disabilities. A primary goal is to develop an increased capacity for research in the general domain of rehabilitation science, and particularly in the area of disability studies; very important to increasing capacity is increasing the recruitment, admission, and training of people with disabilities. The program of study is based on a challenging curriculum of didactic instruction, clinical exposures, community interaction, and research experiences, and encompasses study and research over a spectrum of scientific, technical, psychosocial, physical, physiological, cultural, ethical, political, economic, and clinical issues.

Research Training and Career Development Program

Virginia Commonwealth University
Physical Medicine and Rehabilitation
Box 980542
Richmond, VA 23298-0542
jskreutzer@nsc.vcu.edu
http://www.neuro.pmr.vcu.edu

Principal Investigator: Jeffrey S. Kreutzer, PhD
Public Contact: 804/828-0231; Fax: 804/828-2378

Project Number: H133P70003
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $142,430; FY 98 $149,971
Abstract: This project increases the number of highly skilled rehabilitation research professionals through an advanced research training program. The research training program is built upon an existing network of research, clinical care, and teaching resources: on-campus resources include the nation's third largest teaching hospital, an NIH Head Injury Center, a Rehabilitation Research and Training Center, and NIDRR traumatic brain injury and spinal cord injury model systems of care. Program philosophy emphasizes interdisciplinary collaboration, creativity, quality, and diligence, and emphasizes applied research; it provides training to individuals with advanced degrees who are committed to a career in rehabilitation. A distinguished interdisciplinary faculty represents fields within basic sciences, biostatistics and methodology, medicine, psychology, computing and telecommunications, allied health fields, and vocational rehabilitation.

State Technology Assistance

This program, funded under The Assistive Technology Act of 1998, supports consumer-driven, statewide, technology-related assistance for individuals of all ages and disabilities. The purpose of these grants is to establish a program of statewide, comprehensive, technology-related assistance for individuals with disabilities of all ages.

Alabama Statewide Technology Access and Response Project (STAR) System for Alabamians with Disabilities

Alabama Department of Rehabilitation Services
2125 East South Boulevard
P.O. Box 20752
Montgomery, AL 36120-0752
jbanks@rehab.state.al.us
http://www.rehab.state.al.us/star

Principal Investigator: Tom Gannaway, PhD
Public Contact: 800/782-7656 (V, in state only); 334/613-3480 (V); 334/613-3519 (TTY); Fax: 334/613-3485

Project Number: H224A30009
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $520,670; FY 94 $540,000; FY 95 $580,000; FY 96 $536,900; FY 97 $574,900; FY 98 $710,052

Abstract: This project addresses nine goals: (1) to establish an organizational structure that maximizes consumer participation; (2) to facilitate interagency collaboration in the development of policies and procedures concerning technology services; (3) to maximize consumer participation at all levels of project activities; (4) to establish a statewide consumer and family network; (5) to develop a statewide consumer-responsive information and referral system; (6) to develop a public awareness campaign to elevate the understanding of the benefits and use of technology for people with disabilities; (7) to develop and provide technology training activities for consumers, their families, professionals, employers, and the general public regarding technology-related issues; (8) to advance positive policy and funding changes that improve the procurement of and access to technology devices and services; and (9) to develop and implement a project evaluation system and conduct ongoing needs assessment.

Assistive Technologies of Alaska

Alaska Department of Education
Division of Vocational Rehabilitation
1016 West Sixth, Suite 200
Anchorage, AK 99501
kathe_matrone@educ.state.ak.us
http://www.corecom.net/ATA

Principal Investigator: Kathe Matrone, 907/563-2599 (V/TTY)
Public Contact: Rose Foster, 907/269-3569 (V/TTY); Fax: 907/269-3632

Project Number: H224A00002
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $563,052; FY 91 $565,205; FY 92 $595,000; FY 93 $748,000; FY 94 $749,298; FY 95 $749,298; FY 96 $693,618; FY 97 $731,618; FY 98 $548,714
Abstract: Assistive Technologies of Alaska (ATA) is a systems change project funded under the authority of the Tech Act. ATA has worked to establish a statewide, consumer-responsive system to improve access to assistive technology. The project has responded to the needs of Alaskans with disabilities by creating training tools and resource documents; establishing a guaranteed loan program; achieving passage of an assistive technology consumer protection law; and setting up a statewide library system for access to technology. In the last two years, the project is transitioning services to other permanent programs.

American Samoa Assistive Technology Service (ASATS) Project

Division of Vocational Rehabilitation
Department of Human and Social Services
Pago Pago, American Samoa 96799

Principal Investigator: Pete P. Galea'i
Public Contact: Edmund Pereira, Program Coordinator, 011/684/699-1529 (V); 011/684/233-7874 (TTY); Fax: 011/684/699-1376

Project Number: H224A30014
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $139,200; FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $210,000
Abstract: This project addresses four goals: (1) identification, training, and support of people with disabilities to provide direction and guidance to the American Samoa Assistive Technology Project; (2) development and implementation of a system for individual and program needs assessment for assistive technology; (3) development and promotion, in collaboration and in partnership with existing agencies, of a consumer responsive, culturally appropriate assistive technology service-delivery system; and (4) development and implementation of a model multi-agency information, education, and public awareness system.

Arizona Technology Access Program (AzTAP)

Institute for Human Development
Northern Arizona University
Box 5630
Flagstaff, AZ 86011-5630
daniel.davidson@nau.edu
http://www.nau.edu/~ihd/aztap

Principal Investigator: Richard W. Carroll, PhD; Dan P. Davidson, PhD
Public Contact: ElizBeth Pifer, 800/477-9921 (V, in state only); 520/523-7035 (V); 520/523-1695 (TTY); Fax: 520/523-9127

Project Number: H224A40002
Start Date: October 1, 1994
Phase: 2nd year of the 1st extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 94 \$507,916; FY 95 \$550,000; FY 96 \$509,130; FY 97 \$547,130; FY 98 \$675,531
Abstract: This program increases access to assistive technology (AT) services and devices for people with disabilities and their families and facilitates the development of a coordinated, consumer-responsive AT service-delivery system. The program includes seven goals: (1) to establish a program infrastructure that is consumer responsive and promotes system change; (2) to increase consumer involvement; (3) to increase interagency collaboration and coordination; (4) to increase awareness of the needs for, and efficacy of, AT services and devices; (5) to increase the competencies and skills of providers and consumers of AT services and devices; (6) to improve program and fiscal resources; and (7) to develop and implement protection and advocacy services in support of the program. Priority activities include: information and referral, training and technical assistance, outreach to under-represented populations, funding and policy analysis, advocacy, and research.

Arkansas Increasing Capabilities Access Network (ICAN)

Arkansas Rehabilitation Services
Department of Workforce Education
2201 Brookwood Drive, Suite 117
Little Rock, AR 72202
sgaskin@compuserve.com
http://www.arkansas-ican.org

Principal Investigator: Sue Gaskin
Public Contact: 800/828-2799 (V/TTY, in state only); 501/666-8868 (V/TTY); Fax: 501/666-5319

Project Number: H224A90020
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 89 $503,811; FY 90 $506,078; FY 91 $551,078; FY 92 $725,000; FY 93 $773,929; FY 94 $835,000; FY 95 $835,000; FY 96 $772,951; FY 97 $579,713; FY 98 $386,476
Abstract: This project's activities and objectives include establishing a clearinghouse for technology, expanding funding alternatives for technology, creating a consumer-responsive technology system through legal remedies, expanding outreach programs, increasing system capacity through education across professional and technical disciplines, and providing information and referral services.

California Assistive Technology System (CATS)

California Department of Rehabilitation
Program Community Support Division
2000 Evergreen
Sacramento, CA 95815
ccorby@rehab.cahwnet.gov
http://www.catsca.org

Principal Investigator: William Campagna, 916/263-8686 (V)
Public Contact: Colin Corby, 916/263-8687 (V/TTY); Fax: 916/263-8683

Project Number: H224A30008
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $550,000; FY 94 $680,000; FY 95 $900,000; FY 96 $833,000; FY 97 $871,121; FY 98 $1,337,103
Abstract: This project carries out its mission through the work of two groups--a State Interagency Committee on Technology-Related Assistance (SICTRA) and the CATS Steering Council (a majority of whose members are consumers). SICTRA oversees programs aimed at reducing interagency impediments to service delivery. The CATS Steering Council oversees the development of programs for information and referral, the development of curricula, presentation of workshops for consumers and community organizations, and examination of mechanisms and methodology to increase both technology funding and the means to reach unserved and underserved populations.

Colorado Assistive Technology Project (CATP)

University of Colorado Health Sciences Center
Colorado University Affiliated Program
The Pavilion, A036 Box B140
1919 Ogden Street, Second Floor
Denver, CO 80218
cathy.bodine@uchsc.edu
http://www.uchsc.edu/catp

Principal Investigator: Cathy Bodine, Project Director
Public Contact: 800/255-3477 (in state only); 303/864-5100 (V); 303/864-5110 (TTY); Fax: 303/864-5119

Project Number: H224A40014
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $540,140; FY 90 $542,571; FY 91 $577,571; FY 92 $609,538; FY 93 $690,407; FY 94 $780,000; FY 95 $780,000; FY 96 $722,000; FY 97 $541,529; FY 98 $361,019
Abstract: This project's activities and objectives include a network of Technology Outreach Centers throughout the state and a central assistive technology resource center. Project activities include information, referral, public awareness, training, technical assistance, and electronic networking linkages between local agencies and the state. Systems-change activities include a task force on policy review and analysis, ongoing advocacy education, and direct advocacy services through a contract with the state protection and advocacy system.

Connecticut Assistive Technology Project

Connecticut Department of Social Services
Bureau of Rehabilitation Services
25 Sigourney Street, 11th Floor
Hartford, CT 06106
cttap@aol.com
http://www.techact.uconn.edu

Principal Investigator: John Ficarro
Public Contact: 800/537-2549 (in state only); 860/424-4881 (V); 860/424-4839 (TTY); Fax: 860/424-4850

Project Number: H224A20013
Start Date: October 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $525,000; FY 93 $554,000; FY 94 $580,000; FY 95 $520,000; FY 96 $500,000; FY 97 $538,000; FY 98 $651,365

Abstract: This program includes a single point of entry, advocacy, information and referral, peer counseling, and access to objective expert advice and consultation for people with disabilities. This system is founded on the principles of ready access to available technology, informed choice, coordination, and maximum use of available resources and knowledge. The project created a low-interest assistive technology revolving loan fund to serve as an alternative funding mechanism for individuals ineligible for existing funding streams. Finally, the program is supported by an extensive training, education, and public awareness component. The project has entered into a contract with the Office of Protection and Advocacy and is refocusing on systems change and advocacy issues. The Project is developing an equipment recycling program, and is the primary sponsor of an annual assistive technology trade fair.

Delaware Assistive Technology Initiative (DATI)

Applied Science and Engineering Laboratories
University of Delaware
A.I. duPont Institute
Hospital for Children
1600 Rockland Road, Room 117E
P.O. Box 269
Wilmington, DE 19899-0269
dati@asel.udel.edu
http://www.asel.udel.edu/dati

Principal Investigator: Beth A. Mineo Mollica, PhD
Public Contact: Sonja Simowitz, Project Coordinator, 800/870-DATI (V/TTY, in state only); 302/651-6790 (V); 302/651-6794 (TTY); Fax: 302/651-6793

Project Number: H224A10005
Start Date: September 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $501,562; FY 92 $505,146; FY 93 $550,616; FY 94 $620,000; FY 95 $620,000; FY 96 $573,934; FY 97 $611,928; FY 98 $695,827
Abstract: The DATI project has established county resource centers in each of Delaware's three counties. These centers serve as information and equipment resource sites, offering short-term equipment loans, training and demonstration workshops, and regular informational mailings. DATI also offers a statewide annual conference that features a series of presentations and a large exhibit hall for manufacturers and service providers to display their devices and services. A bi-monthly newsletter featuring articles on funding, equipment recycling, and general assistive technology information is mailed statewide. Collaboration among existing state agencies and consumer groups has enhanced further assistive technology promotion throughout the state.

University Legal Services AT Program for the District of Columbia

University Legal Services
300 I Street Northeast, Suite 200
Washington, DC 20002
alugo@uls-dc.com
http://www.atpdc.org

Principal Investigator: Alicia Johns
Public Contact: Alex Lugo, Information Specialist, 202/547-0198 (V); 202/547-2657 (TTY); Fax: 202/547-2662

Project Number: H224A30001
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $500,000; FY 94 $550,180; FY 95 $565,000; FY 96 $523,015; FY 97 $557,503; FY 98 $632,503

Abstract: This project's activities are designed to empower individuals with disabilities; to promote consumer involvement and advocacy; and provide information, referral, and training as they relate to accessing assistive technology services and devices; and to identify and improve access to funding resources. Activities focus on increasing access to assistive technology devices and services for school age children, public awareness, and demonstrations targeted toward individuals who are underserved. The program collaborates with public and private entities, conducts advocacy training specifically for consumers with disabilities, and implements systems change activities that increase access to, provision of, and funding for assistive technology devices and services on a permanent basis.

Assistive Technology Funding and Systems Change

United Cerebral Palsy Associations, Inc.
1660 L Street Northwest, Suite 700
Washington, DC 20036
http://www.ucpa.org/html/innovative/atfsc/index.html

Principal Investigator: Karen Flippo
Public Contact: 800/USA-5UCP (V/TTY); 202/776-0406 (V/TTY); Fax: 202/776-0414

Project Number: HN94040001
Start Date: October 1, 1994
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 94 $713,627; FY 95 $739,835; FY 96 $744,810; FY 97 $750,000; FY 98 $750,000
Abstract: This contract provides nationwide training, technical assistance, material development, and dissemination of materials and products related to assistive technology funding and systems change. An Assistive Technology Leadership Total Quality Management (TQM) Group, representing all four regions of the country, functions as external ombudsman for the project, to ensure that project activities are relevant, consumer responsive, user friendly, accurate, timely and dependable, and are focused on assistive technology funding issues and systems change. NIDRR awarded this contract to United Cerebral Palsy Associations, Inc.; the subcontracting organization is Neighborhood Legal Services. This project maintains the atfscp@ucpa.org discussion list.

Florida Alliance for Assistive Service and Technology (FAAST), Inc.

FAAST, Inc.
1020 East Lafayette Street, Suite 110
Tallahassee, FL 32301-4546
faast@faast.org
http://www.faast.org

Principal Investigator: Terry Ward, PhD
Public Contact: 800/322-7881 (V/TTY, in state, information and referral only); 850/487-3278 (V/TTY); Fax: 850/487-2805

Project Number: H224A20014
Start Date: July 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $550,000; FY 93 $995,000 (includes carryover funding); FY 94 $730,000; FY 95 $700,000; FY 96 $647,983; FY 97 $685,983; FY 98 $922,107
Abstract: The focus of this project is increasing consumer awareness regarding the availability of assistive technology devices and services, and fostering advocacy and systems change. Through the state's Regional Centers, Satellites, and a statewide 800 number, consumers can obtain information about assistive technology. Through local consumer advocacy groups and a contract with the Advocacy Center for Persons with Disabilities, individuals are assured of their rights to assistive technology under state and federal laws. During the first phase, the program focused on awareness and creating consumer networks. In this phase, the focus is shifting to six priority areas: (1) the development, implementation, and monitoring of policies, practices, procedures, and organizational structures to improve access to, provision of, funding for, and timely acquisition of assistive technology devices and services; (2) the removal of barriers to obtaining these services; (3) the coordination of activities among state agencies; (4) the development and implementation of strategies to empower people with disabilities and their families to advocate successfully for assistive technology; (5) the provision of outreach to underrepresented and rural populations; and (6) the development of strategies to ensure timely acquisition of assistive technology.

Georgia Tools for Life

Georgia Department of Human Resources
Division of Rehabilitation Services
2 Peachtree Street Northwest, Suite 35-413
Atlanta, GA 30303-3166
102476.1737@compuserve.com
http://www.gatfl.org

Principal Investigator: Joy Kniskern
Public Contact: 800/497-8665 (V, in state only); 404/657-3082 (V); 404/657-3084 (V); 404/657-3085 (TTY); Fax: 404/657-3086

Project Number: H224A10001
Start Date: September 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $519,474; FY 92 $520,000; FY 93 $585,000; FY 94 $729,924; FY 95 $729,924; FY 96 $675,683; FY 97 $713,683; FY 98 $888,822
Abstract: The Georgia Tools for Life program includes training at all levels, public awareness, funding policy analysis, direct services, device demonstration, and program evaluation. The hub of Tools for Life is operated out of the Georgia Division of Rehabilitation Services. Tools for Life is responsible for seven areas of coordination: (1) policy analysis and improved service delivery, (2) coordination with consumers, (3) coordination among public and private organizations, (4) training and technical assistance, (5) public awareness and an information and referral network, (6) advocacy, and (7) consumer-responsive program evaluation. Tools for Life also coordinates seven Technology Resource Centers, the ReBoot Computer Recycling Service, and is establishing a fund for adaptive equipment loans. It also provides technical assistance to Touch the Future, a private, nonprofit organization formed to carry on the Tech Act initiatives in Georgia.

Guam System for Assistive Technology (GSAT)

University of Guam
University Affiliated Program on Developmental Disabilities
UOG Station
303 University Drive
Mangilao, GU 96923
gsat@ite.net
http://uog2.uog.edu/uap/gsat.html

Principal Investigator: Heidi E. Farra-San Nicolas, PhD, 671/735-2481 (V)
Public Contact: Ben Servino, Project Director, 671/735-2493 (V); 671/734-8378 (TTY); Fax: 671/734-5709

Project Number: H224A40003
Start Date: October 1, 1994
Phase: 2nd year of the 1st extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000

Abstract: This project has established a consumer-responsive, comprehensive, territory-wide program of technology-related assistance for people with disabilities to assist in overcoming Guam's unique challenges, including limited local funding, lack of trained personnel, few markets and market incentives, limited information, and limited eligibility for specific federal funding. Additionally, the provision of assistive technology devices and services in the Pacific Basin presents many unique challenges. Small island systems, such as Guam, have limited budgets, and a harsh tropical-island environment (salt water, high humidity, and rough terrain) that creates difficulties for equipment repair and maintenance. The remote geographic location makes procurement, adjustments, and custom modifications to assistive technology equipment extremely difficult and costly. The project emphasizes and supports systems change and advocacy activities that serve to build capacity within existing programs and with people with disabilities of all ages. GSAT is locally administered by the University Affiliated Program on Developmental Disabilities under the College of Education at the University of Guam.

Hawaii Assistive Technology Training and Services (HATTS)

Hawaii Department of Vocational Rehabilitation Services for the Blind and Physically Handicapped
414 Kuwili Street, Suite 104
Honolulu, HI 96817
bfl@pixi.com
http://www.hatts.org

Principal Investigator: Barbara Fischlowitz-Leong, Project Director, 808/586-5366
Public Contact: Judith Clark, 800/645-3007 (V/TTY, in state only); 808/532-7110 (V/TTY); Fax: 808/532-7120

Project Number: H224A10023
Start Date: October 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $530,926; FY 92 $530,926; FY 93 $530,926; FY 94 $660,895; FY 95 $678,000; FY 96 $627,618; FY 97 $665,618; FY 98 $754,956
Abstract: Hawaii Assistive Technology Training and Services (HATTS) provides information and training on devices, services, and funding resources. Activities include partnerships with a variety of groups including consumers, educators, state agencies, and private organizations. HATTS also increases AT awareness and promotes self-advocacy among people with disabilities. The project subcontracts with the Protection and Advocacy Agency of Hawaii to provide legal representation. An advisory council to the project provides input from the perspective of consumers and service providers, and the project collaborates with state agency officials through its Policy Coordinating Committee.

Idaho Assistive Technology Project

Center on Disabilities and Human Development: Idaho's UAP
University of Idaho
Professional Building
129 West Third Street
Moscow, ID 83844-4401
seile861@uidaho.edu
http://www.ets.uidaho.edu/cdhd/idahoat

Principal Investigator: Ron Seiler, Project Director
Public Contact: Michelle Doty, 800/432-8324 (V/TTY); 208/885-3559 (V/TTY); Fax: 208/885-3628

Project Number: H224A20017
Start Date: September 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $529,436; FY 93 $676,680 (includes carryover funding); FY 94 $620,000; FY 95 $634,246; FY 96 $587,115; FY 97 $625,115; FY 98 $719,907
Abstract: The Idaho Assistive Technology Project is managed by the Center on Disabilities and Human Development at the University of Idaho. The project engages in systems change activities, training, materials development, information dissemination, and advocacy activities directed at increasing the availability of assistive devices and services to Idahoans who have disabilities. A customer board directs the overall activities of the project and engages in a process of barrier identification and elimination. Major project components include training for consumers and service providers about assistive technology, funding and loan programs for AT, advocacy, direct service provision through five regional resource centers, and systems change that addresses policy, practice, and legislation.

Illinois Assistive Technology Project

IATP
1 West Old State Capitol Plaza, Suite 100
Springfield, IL 62701
iatp@fgi.net
http://www.iltech.org

Principal Investigator: Wilhelmina Gunther
Public Contact: Sherry Edwards, 800/852-5110 (V/TTY, in state only); 217/522-7985 (V/TTY); 217/522-9966 (TTY); Fax: 217/522-8067

Project Number: H224A90038
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $515,300; FY 90 $517,619; FY 91 $617,619; FY 92 $620,000; FY 93 $750,000; FY 94 $923,271; FY 95 $923,271; FY 96 $833,121; FY 97 $640,997; FY 98 $427,332
Abstract: This project's activities and objectives include information and referral services highlighting available technology and services, comprehensive advocacy training for people with disabilities and their families, and opportunities to explore assistive technology options in the demonstration center. The project has statewide consumer involvement. Consumers have input into all facets of the project's operation, from establishing goals and objectives to implementing the activities.

Indiana ATTAIN (Accessing Technology Through Awareness in Indiana) Project

Vincennes University
Social Sciences Building, Room 312
1002 North First
Vincennes, IN 47591
cfulford@indian.vinu.edu

Principal Investigator: Christine Fulford
Public Contact: 800/528-8246 (V, in state only); 800/743-3333 (TTY, National); 812/888-5710; Fax: 317/921-8774

Project Number: H224A00027
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $521,480; FY 91 $541,277; FY 92 $565,277; FY 93 $660,288; FY 94 $726,892; FY 95 $726,892; FY 96 $672,877; FY 97 $710,877; FY 98 $533,158
Abstract: Assistive Technology Through Action in Indiana (ATTAIN) has primary responsibility for the Indiana Technology-Related Assistance Program. The project promotes: community-based, technology-related services and systems change through outreach and training; advocacy on funding issues; policy review; position statements; and assessments.

Iowa Program for Assistive Technology

Iowa University Affiliated Program
University Hospital School
100 Hawkins Drive
Iowa City, IA 52242-1011
infotech@uiowa.edu
http://www.uiowa.edu/infotech

Principal Investigator: Jane Gay, BSN, RN; Mary Quigley, JD, 319/356-4402 (V)
Public Contact: Ann Dudler; Amy Hanna; Jennifer Britton, 800/331-3027 (V/TTY); Fax: 319/356-8284

Project Number: H224A00028
Start Date: April 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $557,322; FY 91 $594,287; FY 92 $595,289; FY 93 $700,314; FY 94 $735,000; FY 95 $735,000; FY 96 $680,382; FY 97 $718,382; FY 98 $538,787
Abstract: This project conducts awareness and training programs and collaborates with other systems-change efforts. The information and referral portion of the Iowa program, InfoTech, provides information on new and used adaptive equipment, funding information, and a bi-monthly newsletter. An interstate agreement with Minnesota to provide information and referral has also been implemented. The goals and objectives of the Iowa Program are developed and implemented through an extensive process that involves consumers, advocacy organizations, private and public service providers, regional and state agencies, third-party payors, and entities not traditionally associated with assistive technology services.

Assistive Technology for Kansans Project

University of Kansas
Life Span Institute
2601 Gabriel Avenue
P.O. Box 738
Parsons, KS 67357
chuck@ukans.edu
http://www.atk.lsi.ukans.edu

Principal Investigator: Charles R. Spellman, EdD; Sara H. Sack, PhD
Public Contact: 800/526-3648 (800/KAN DO IT, in state only); 316/421-8367 (V/TTY); Fax: 316/421-0954

Project Number: H224A30013
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $515,000; FY 94 $529,999; FY 95 $550,000; FY 96 $513,758; FY 97 $551,758; FY 98 $665,404
Other funding: FY 93 $89,029 (Kansas Rehabilitation Services); FY 95 $395,000 (KRS); FY 96 $780,000 (KRS)
Abstract: Through consumer involvement and leadership by the Kansas University Program at Parsons, this project engages in activities that are designed to result in laws, regulations, policies, practices, or organizational structures that promote consumer-responsive programs that increase access to assistive technology devices and services. Through subcontracts with organizations across the state, the project operates five Regional Assistive Technology Access Sites, provides a toll-free number that connects callers directly to the appropriate Regional Access Site, manages an Interagency Equipment Loan System, coordinates the statewide assistive technology distance learning program, conducts a three-day Assistive Technology Conference, and leads a policy analysis and legislative alert effort.

Kentucky Assistive Technology Services (KATS) Network

Kentucky Department for the Blind
KATS Network Coordinating Center
8412 Westport Road
Louisville, KY 40242
katsnet@iglou.com
http://www.katsnet.org

Principal Investigator: J. Chase Forrester, JD, Project Director
Public Contact: Jim Syme, 800/327-5287 (V/TTY, in state only); 502/327-0022 (V/TTY); Fax: 502/327-9947

Project Number: H224A90002
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 89 $535,102; FY 90 $537,510; FY 91 $577,102; FY 92 $680,000; FY 93 $710,108; FY 94 $800,000; FY 95 $800,000; FY 96 $740,552; FY 97 $555,414; FY 98 $370,276
Abstract: This project is a statewide network of organizations and individuals connecting to enhance and incorporate assistive technology into services that improve the quality and productivity of life for the people of Kentucky. The end goal of this consumer-driven, collaborative system is to make assistive technology information, devices, and services easily obtainable for people of any age or disability. In addition to its primary role in the development and coordination of activities among state agencies and organizations that facilitate access to, provision of, and funding for assistive technology devices and services, the Coordinating Center staff conducts information and referral services using a statewide service provider database, disseminates information, coordinates training activities, publishes a newsletter, operates an equipment recycling and lending program, and implements a low interest loan program. Consumers represent a majority of the advisory board membership.

Louisiana Assistive Technology Access Network (LATAN)

LATAN
P.O. Box 14115
3042 Old Forge Road, Suite B
Baton Rouge, LA 70898-4115
jmnesbit@aol.com; latanstate@aol.com
http://www.latan.org

Principal Investigator: Julie M. Nesbit
Public Contact: Clara Pourciau, 800/270-6185 (V/TTY); 225/925-9500 (V/TTY); Fax: 225/925-9560

Project Number: H224A10028
Start Date: September 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $502,566; FY 92 $505,398; FY 93 $555,398; FY 94 $631,095; FY 95 $660,000; FY 96 $610,955; FY 97 $648,955; FY 98 $791,475
Abstract: Louisiana Assistive Technology Access Network (LATAN) is a consumer-directed, consumer-responsive advocacy and systems change project whose mission is to ensure that people with disabilities in the state who want assistive technology have what they need and are able to use it. Major program initiatives include: (1) consumer involvement, consumer empowerment, and training, (2) advocacy and systems change, (3) outreach, and (4) interagency coordination. In its continuing effort to reach rural and outlying areas of the state, LATAN maintains four regional programs, with coordinators in northeast, northwest, southeast, and southwest regions of the state. Each region also has an all-consumer volunteer advisory council to represent the specific needs and issues of the region, and to advise and assist the regional coordinators. Regional AT coordinators and advisory councils continue to develop satellite sites in already-existing organizations and groups to build the capacity of those groups to provide assistive technology and advocacy. These sites provide the opportunity for LATAN to reach rural and inner-city areas, where a majority of ethnic minorities and elderly people reside. An all-consumer Board of Directors directs the project.

Maine Consumer Information and Technology Training Exchange (Maine CITE)

Maine Department of Education
Division of Special Services
46 University Drive
Augusta, ME 04330
kpowers@maine.maine.edu
http://www.mecite.doe.k12.me.us

Principal Investigator: David Noble Stockford, 207/287-5950 (V); 207/287-2550 (TTY)
Public Contact: Kathleen Powers, Project Director, 207/621-3195 (V/TTY); Fax: 207/621-3193

Project Number: H224A90047
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $541,876; FY 90 $544,315; FY 91 $594,315; FY 92 $650,000; FY 93 $750,000; FY 94 $845,000; FY 95 $845,000; FY 96 $782,000; FY 97 $586,656; FY 98 $391,104
Abstract: This project collaborates with various Maine organizations, including centers for independent living, parent training agencies, and nonprofit community programs, to build a statewide network of information and resources on assistive technology. The University of Maine System's interactive television equipment is used to extend statewide education, awareness, and training. Maine also has a statewide $5 million adaptive equipment loan fund and an electronic data bank of state resources located at the Maine State Library.

Maryland Technology Assistance Program (MTAP)

Maryland Governor's Office for Individuals with Disabilities
Box 10, One Market Center
300 West Lexington Street
Baltimore, MD 21201
mdtap@clark.net
http://www.mdtap.org

Principal Investigator: Paul Rasinski, Project Director
Public Contact: Patrick McCurdy, 800/832-4827 (V/TTY); 410/333-4975 (V/TTY); Fax: 410/333-6674

Project Number: H224A90019
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $500,000; FY 90 $502,250; FY 91 $502,250; FY 92 $671,029; FY 93 $770,000; FY 94 $825,000; FY 95 $825,000; FY 96 $763,694; FY 97 $572,771; FY 98 $381,000
Abstract: Activities of this project include conducting a public awareness campaign with a toll-free phone number, maintaining lending libraries, and maintaining an equipment demonstration center. The project uses regional technology specialists and existing state and private resources, and performs a statewide evaluation of the effectiveness of technology.

Massachusetts Assistive Technology Partnership

Children's Hospital
1295 Boylston Street, Suite 310
Boston, MA 02115
matp@matp.org
http://www.matp.org

Principal Investigator: Marylyn Howe, Project Director, 617/695-7500 (V); 617/698-7600 (TTY)
Public Contact: Patricia Hill, 800/848-8867 (V/TTY, information and referral, in state only); 617/355-7153 (V, information and referral); 617/355-7301 (TTY); 800/950-6287 (BBS, in state only); Fax: 617/355-6345

Project Number: H224A00036
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $563,998; FY 91 $593,993; FY 92 $624,062; FY 93 $725,764; FY 94 $811,962; FY 95 $811,962; FY 96 $751,592; FY 97 $789,592; FY 98 $592,194

Abstract: The Massachusetts Assistive Technology Partnership (MATP) is a consumer-responsive, cross-disability, multicultural, statewide project that conducts activities to increase access to assistive technology for people with disabilities. Activities include public awareness, information services, training and technical assistance, funding and policy analysis, advocacy, and related work to improve services and promote involvement of people with disabilities in assistive technology. Through regional Peer Assistive Technology Programs, MATP provides information and referral, peer networking, training, and individual and systems advocacy. The MATP works closely with people with disabilities, family members, providers, and state agencies to identify needs and pursue change in the assistive technology service-delivery system. The project publishes an assistive technology newsletter, pursues remedies of funding and policy barriers, provides training on a range of assistive technology available and resources for obtaining assistive technology, pursues improvement of equipment standards, promotes increased availability of services, promotes increased involvement of people with disabilities in assistive technology services and policy making, and coordinates with related projects in Massachusetts, regionally, and nationally.

Michigan TECH 2000

Michigan Disability Rights Coalition
Rehabilitation Services
740 West Lake Lansing Road, Suite 400
East Lansing, MI 48823
roanne@match.org
http://www.discoalition.org/tech2000home.htm

Principal Investigator: Sheryl Avery-Meints, Project Director
Public Contact: RoAnne Chaney, 800/760-4600 (V/TTY, in state only); 517/333-2477 (V/TTY);
Fax: 517/333-2677

Project Number: H224A50009
Start Date: September 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $550,000; FY 93 $885,881 (includes carryover funding); FY 94 $610,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,033,953
Abstract: Michigan's TECH 2000 focuses on building the capacity of community based, local organizations to advocate for the use of assistive technology as a tool for inclusion in all aspects of life. Currently, TECH 2000 supports 23 local projects that are capable of creating genuine systems change on a local basis that results in better access to and use of assistive technology by people with disabilities. TECH 2000 continues to support a statewide bulletin board system, MATCH: The Michigan Assistive Technology Clearinghouse.

Minnesota System of Technology to Achieve Results (STAR) Program

State of Minnesota
Governor's Advisory Council on Technology for People with Disabilities
300 Centennial Building
658 Cedar Street
St. Paul, MN 55155
rachel.wobschall@state.mn.us
http://www.admin.state.mn.us/assistivetechnology

Principal Investigator: Rachel Wobschall
Public Contact: 800/657-3862 (V, in state only); 800/657-3895 (TTY, in state only); 612/296-2771 (V); 612/296-8478 (TTY); Fax: 612/282-6671

Project Number: H224A90041
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $500,000; FY 90 $502,250; FY 91 $567,250; FY 92 $700,000; FY 93 $750,000; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $694,268; FY 98 $569,300
Abstract: This project: (1) provides a toll-free information service for residents of Minnesota and Iowa; (2) distributes brochures and other literature; (3) hosts workshops and forums; (4) provides opportunities for consumer involvement; and (5) assists individuals seeking funding. STAR advocates for policy, practice, and legislative change regarding access to assistive technology; contracts for mobile outreach projects and legal advocacy services; and provides grants on a regional basis.

Mississippi Project START (Success Through Assistive/Rehabilitative Technology)

Mississippi Department of Rehabilitation Services
P.O. Box 1698
Jackson, MS 39215-1000
spower@netdoor.com

Principal Investigator: Steve Power, Project Director
Public Contact: Albert Newsome, 800/852-8328 (V/TTY, in state only); 601/987-4872 (V/TTY); Fax: 601/364-2349

Project Number: H224A00032
Start Date: May 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $521,285; FY 91 $530,000; FY 92 $554,000; FY 93 $594,714; FY 94 $619,430; FY 95 $619,430; FY 96 $573,400; FY 97 $611,400; FY 98 $458,550
Abstract: Project START is a multifaceted, collaborative effort. The primary components include: (1) an advisory council that allows for consumer input and the involvement of other relevant agencies, organizations, and groups; (2) an information clearinghouse that provides people with disabilities, their families, service providers, and other interested parties with information regarding available assistive technology devices and services; (3) a training program that ensures that service provider personnel, people with disabilities, and other relevant parties are familiar with the utility and potential of assistive technology devices; (4) a model service-delivery system that acts as a referral source and concurrent technical resource to existing assistive technology providers, and provides assistive technology services to people with disabilities ineligible for existing programs; and (5) an equipment loan program that makes assistive devices available to people with disabilities for trial periods, for use while their personal equipment is being repaired or replaced, and to service providers for training and demonstration purposes.

Missouri Assistive Technology Project

Missouri Department of Labor and Industrial Relations
Governor's Council on Disability
4731 South Cochise, Suite 114
Independence, MO 64055-6975
matpmo@qni.com
http://www.dolir.state.mo.us/matp

Principal Investigator: Diane Golden, PhD, Project Director
Public Contact: 800/647-8557 (V, in state only); 800/647-8558 (TTY, in state only); 816/373-5193 (V); 816/373-9315 (TTY); Fax: 816/373-9314

Project Number: H224A30015
Start Date: September 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $524,488; FY 92 $526,988; FY 93 $550,801; FY 94 $667,121; FY 95 $675,000; FY 96 $689,639; FY 97 $727,639; FY 98 $878,221
Abstract: The primary components of this project include: (1) an advisory council established to provide input from consumers and relevant state agencies; (2) an information and referral service; (3) a training program familiarizing consumers and service providers with devices, services, and issues such as policy change, advocacy, and individual advocacy; (4) six assistive technology demonstration centers to provide outreach throughout the state; (5) individual advocacy services; and (6) legislative and policy initiatives including an assistive technology lemon law, an equipment distribution program through the state relay service, and Medicaid-managed care reform.

MonTECH

Rural Institute on Disabilities
University of Montana
634 Eddy Avenue
Missoula, MT 59812
montech@selway.umt.edu
http://rudi.montech.umt.edu

Principal Investigator: Bill Lamb, 406/444-2590 (V)
Public Contact: Gail McGregor, Project Director, 800/732-0323 (V/TTY, in state only); 406/243-5676 (V/TTY); 800/961-9610 (BBS, in MT/WY only); 406/243-2318 (BBS); Fax: 406/243-4730

Project Number: H224A10002
Start Date: September 30, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $550,553; FY 92 $550,553; FY 93 $590,553; FY 94 $675,258; FY 95 $673,058; FY 96 $624,080; FY 97 $663,080; FY 98 $752,408
Abstract: Project goals are systems change and capacity building, full consumer access, and statewide community participation. Emphasis is on enacting statewide systems and policy change, improving awareness, strengthening consumer and provider networks, and increasing access to funding. A network of local advocates provides individual information and one-to-one assistance to obtain funding. The Montana Consortium for Assistive Technology (MCAT) serves as the program advisory board and offers opportunities for consumer participation. Activities currently underway include: (1) focused outreach activities with the state's largest minority group, Native Americans; (2) various training programs; (3) an assistive technology loan/lease clearinghouse; (4) an electronic bulletin board system and Internet Web site; and (5) an information and assistance service that includes maintenance of a comprehensive database of Montana service programs. Other activities include a comprehensive equipment demonstration and evaluation center offering hands-on experience with devices to both consumers and service providers, and a low-interest financial loan program for consumers who do not qualify for other funding sources.

Nebraska Assistive Technology Partnership

Nebraska Department of Education
Division of Vocational Rehabilitation
5143 South 48th Street, Suite C
Lincoln, NE 68516
atp@nde4.nde.state.ne.us
http://www.nde.state.ne.us/ATP/TECHome.html

Principal Investigator: Mark Schultz, Project Director, 402/471-0734 (V/TTY)
Public Contact: Kathryn Kruse, 888/806-6287 (V/TTY, in state only); 402/471-0734 (V/TTY); 402/471-3647 (V/TTY); Fax: 402/471-6052

Project Number: H224A90040
Start Date: October 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $523,000; FY 90 $525,352; FY 91 $570,352; FY 92 $730,000; FY 93 $766,984; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $569,300; FY 98 $379,533
Abstract: This project has established an information and referral network, demonstration centers, a peer network, and special studies on payment practices. It has also developed training materials for health care and insurance professionals and computer databases for used equipment listings. A three-hour instructional unit on *Assistive Technology in the Classroom* is available for purchase and a special education technical manual has been written.

Nevada Assistive Technology Collaborative

Nevada Rehabilitation Division
Community-Based Services
711 South Stewart Street
Carson City, NV 89710
pgowins@govmail.state.nv.us
http://www.state.nv.us.80

Principal Investigator: Donny Loux
Public Contact: Paul Haugen, 888/337-3839 (V, in state only); 702/687-4452 (V); 702/687-3388 (TTY); Fax: 702/687-3292

Project Number: H224A00037
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $560,884; FY 91 $580,047; FY 92 $594,368; FY 93 $624,588; FY 94 $675,046; FY 95 $675,046; FY 96 $624,883; FY 97 $662,883; FY 98 $497,162
Abstract: The Nevada Project is accomplishing 15 major goals in systems change that have been established in response to identified needs in consultation with the state's consumer-directed executive board. Additionally, the project trains 400 consumers in the use of technology; a minimum of 1,800 consumers in self-advocacy skills; 550 families in applying technology to the needs of a family member with a disability; and a minimum of 5,730 cross-disciplinary university undergraduates in the fields of medicine, health, education, rehabilitation, gerontology, engineering, speech pathology and audiology, and counseling in assistive technology and cultural awareness. The project provides information and referral and other awareness services to a minimum of 10,000 consumers over the life of the project and evaluates the impact of those services through follow-up and satisfaction surveys.

New Hampshire Technology Partnership Project

University of New Hampshire Technology Partnership
Institute on Disability
The Concord Center
#14 Ten Ferry Street, Suite 307
Concord, NH 03301-5019
mjpawlek@christa.unh.edu
http://www.iod.unh.edu/projects/spd.htm

Principal Investigator: Jan Nisbet, PhD; Terese Wilkomm, PhD, 603/862-4320 (V/TTY)
Public Contact: Marion Pawlek, 800/427-3338 (V/TTY, in state only); 603/224-0630 (V/TTY); Fax: 603/226-0389

Project Number: H224A10015
Start Date: September 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $506,307; FY 92 $505,008; FY 93 $550,008; FY 94 $635,000; FY 95 $635,000; FY 96 $587,813; FY 97 $625,813; FY 98 $717,815
Abstract: This project provides extensive training and network development focused on: (1) early intervention, (2) inclusive education, (3) supported living and employment, and (4) using alternative and augmentative communication to develop free expression and citizenship. Recycled equipment, demonstration and training, and information and referral are also available. The project's lead agency is the Institute on Disability, a University Affiliated Program at the University of New Hampshire. Additional subcontracts have been awarded to Granite State Independent Living, Disabilities Rights Center, and New Hampshire Alliance for Assistive Technology.

New Jersey Technology Assistive Resource Program (TARP)

New Jersey Protection and Advocacy, Inc.
210 South Broad Street, Third Floor
Trenton, NJ 08608
packr@njpanda.org
http://www.njpanda.org

Principal Investigator: Ellen Lence, Project Director, 609/777-0945
Public Contact: 800/342-5832 (V, in state only); 609/633-7106 (TTY); 609/777-0945; Fax: 609/777-0187

Project Number: H224A20007
Start Date: September 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $548,050; FY 93 $670,528 (includes carryover funding); FY 94 $548,050; FY 95 $550,000; FY 96 $509,130; FY 97 $547,130; FY 98 $710,380
Abstract: TARP is a consumer-driven program whose mission is to increase awareness of and improve access to assistive technology for all people with disabilities in the state. TARP provides information and referral through its 800 telephone number regarding all aspects of assistive technology. TARP also provides advocacy services, both legal and nonlegal, addressing both individual and systems issues. In addition, TARP provides training and technical assistance, as well as outreach regarding the benefits of and funding for assistive technology devices and services. TARP disseminates brochures, program videos, funding guides, and informational bulletins.

New Mexico Technology Assistance Program (NMTAP)

New Mexico State Department of Education
Division of Vocational Rehabilitation
435 Saint Michaels Drive, Building D
Santa Fe, NM 87505
nmdvrtap@aol.com
http://www.nmtap.com

Principal Investigator: Alan Klaus, Project Director
Public Contact: Carol Cadena, 800/866-2253 (V/TTY); 800/659-4915 (TTY); 505/954-8533 (V/TTY); Fax: 505/954-8562

Project Number: H224A00017
Start Date: April 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $500,500; FY 91 $515,500; FY 92 $525,000; FY 93 $660,710; FY 94 $750,000; FY 95 $750,000; FY 96 $694,000; FY 97 $732,268; FY 98 $549,201
Abstract: NMTAP examines and works to eliminate barriers to obtaining assistive technology in New Mexico. The project has established a statewide program for coordinating assistive technology services; the program is designed to assist people with disabilities to locate, secure, and maintain assistive technology that can increase, maintain, or improve functional capabilities of people with disabilities. This program is a resource both for people requiring assistive technology and those that manufacture and provide assistive technology devices or services. The program focuses on permanently eliminating barriers in three major areas: access to, availability of, and funding for assistive technology.

New York State Technology-Related Assistance of Individuals with Disabilities (TRAID) Project

New York State Office of Advocate for Persons with Disabilities
TRAID Project
One Empire State Plaza, Suite 1001
Albany, NY 12223-1150
traid@emi.com
http://www.state.ny.us/disabledAdvocate/technlog.htm

Principal Investigator: Deborah Buck, Project Director
Public Contact: 800/522-4369 (V/TTY/Spanish, in state only); 518/474-2825 (V); 518/473-4231 (TTY); Fax: 518/473-6005

Project Number: H224A00041
Start Date: October 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $500,000; FY 91 $600,000; FY 92 $615,000; FY 93 $820,961; FY 94 $950,000; FY 95 $950,000; FY 96 $879,406; FY 97 $917,406; FY 98 $688,054
Abstract: The Technology-Related Assistance of Individuals with Disabilities (TRAID) Project has been established to improve access to assistive technology through consumer-responsive interventions to effect systemic change on a policy, regulatory, and legislative level. Project staff members chair and facilitate the workings of the NYS Interagency Partnership on Assistive Technology, a group designed to collaborate with a consumer-majority advisory board to identify systemic barriers to assistive technology devices and services and collaborate on strategies to address the barriers. In collaboration with the NYS Department of Health, Early Intervention Program, and Bell Atlantic, the local telecommunications corporation, the TRAID Project administers 12 Regional TRAID Centers that operate device demonstration and loan services, coordinate local information and referral, and support individualized self-advocacy. The TRAID Project also provides information and referral regarding assistive technology, provides training and public awareness, and administers the TRAID-IN Equipment Exchange service.

North Carolina Assistive Technology Project

North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services
1110 Navaho Drive, Suite 101
Raleigh, NC 27609-7322
rickic@mindspring.com
http://www.mindspring.com/~ncatp

Principal Investigator: Ricki Cook, Project Director
Public Contact: 919/850-2787 (V/TTY); Fax: 919/850-2792

Project Number: H224A00010
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $566,425; FY 91 $595,441; FY 92 $625,843; FY 93 $730,152; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $797,066; FY 98 $597,800
Abstract: This project provides information and referral services, technical assistance, and training seminars and materials. It supports four regional demonstration centers that provide demonstration and trial of devices. The project's central office in Raleigh coordinates systems change and advocacy, policy, and funding issues statewide. The North Carolina Division of Vocational Rehabilitation Services provides the project with internal management systems, agency resources, and fiscal management.

National Classification System

Research Triangle Institute (RTI)
Center for Research in Education
3040 Cornwallis Road
P.O. Box 12194
Research Triangle Park, NC 27709-2194
trc@rti.org

Principal Investigator: Becky J. Hayward
Public Contact: 919/541-6538 (V/TTY); Fax: 919/541-6854

Project Number: HN970510
Start Date: September 30, 1997
Length: 12 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 97 $99,998; FY 98 (No-cost extension through 9/29/99)
Abstract: This project conducts several focus groups with users of assistive technology devices and services, and a literature search for information regarding classification systems and lists of assistive technology devices and services. The study team is reviewing: (1) existing lists of AT devices and services to identify and analyze the essential elements of all product descriptions, (2) the most effective ways of describing AT devices and services, (3) any missing information in existing AT classification systems, (4) benefits and drawbacks of current lists, (5) the informational needs of various constituent groups, and (6) other pertinent material. This information is used to develop a national classification that includes a single taxonomy and nomenclature for all AT devices and services. Following development of the classification system, RTI is designing a data collection system that uses the newly devised classification system to obtain uniform information on AT devices and services from a wide range of agencies and programs. Lastly, RTI is preparing a final report that documents the process used to develop the national classification system and the associated data collection instruments. The report provides a blueprint for full-scale implementation of the data collection system.

North Dakota Interagency Program for Assistive Technology (IPAT)

North Dakota Department of Human Services
Office of Vocational Rehabilitation
P.O. Box 743
Cavalier, ND 58220
lee@pioneer.state.nd.us
http://www.ndipat.org

Principal Investigator: Judith A. Lee, Project Director
Public Contact: 888/214-2780 (V/TTY, information and referral); 800/265-4728 (V/TTY, office); 701/265-4807 (V/TTY); Fax: 701/265-3150

Project Number: H224A30003
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $500,000; FY 94 $540,000; FY 95 $540,000; FY 96 $509,130; FY 97 $547,130; FY 98 $633,103
Abstract: The North Dakota Interagency Project for Assistive Technology (IPAT) builds local capacity through consumer-responsive outreach activities, regional coordinator training, and activities designed to build the capacity of minority and young populations. The project empowers consumer choice, control, and independence through access to a full range of technology assistance, by providing short-term access to assistive technology devices via an interagency loan library and long-term information access. Facilitation of change is established through interagency working agreements and development of advocacy resources.

Commonwealth of the Northern Mariana Islands (CNMI) Assistive Technology Project - System of Technology-Related Assistance for Individuals with Disabilities (STRAID)

CNMI Governor's Developmental Disabilities Council
P.O. Box 2565
Capitol Hill
Saipan, MP 96950
gddc@cnmiddcouncil.org
http://www.cnmiddcouncil.org/atstraid/atflash.htm

Principal Investigator: Thomas J. Camacho, Project Director, 670/322-3015 (V)
Public Contact: 670/322-3014 (V/TTY); Fax: 670-322-4168

Project Number: H224A40007
Start Date: October 1, 1994
Phase: 2nd year of the 1st extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000

Abstract: This project provides technology-related assistance for people with disabilities in the Commonwealth of the Northern Mariana Islands. The project focuses on the development of a locally based system for the technology-related needs of children, youth, and adults with disabilities. The primary objective of this project is to enhance opportunities for people with disabilities in the Commonwealth to become independent, productive, integrated, and fully included in the community. Through increased emphasis on coordination with agencies or organizations that provide or pay for the provision of assistive technology devices or services, the Developmental Disabilities Council is building and activating a system that responds to people with disabilities' needs to: (1) have greater control over their lives; (2) participate in, and contribute more fully to, activities in their home, school, work environments, and in the community; (3) interact to a greater extent with individuals who do not have disabilities; and (4) benefit from opportunities that are taken for granted by individuals who do not have disabilities.

Ohio Project on Technology-Related Assistance for Individuals with Disabilities (TRAIN)

Ohio State University Research Foundation
Ohio Supercomputer Center
1224 Kinnear Road
Columbus, OH 43212-1163
huntt.1@osc.edu
http://www.train.state.oh.us

Principal Investigator: Sheldon R. Simon, MD
Public Contact: Douglas Huntt, Executive Director, 800/784-3425 (V/TTY, in state only); 614/292-2426 (V/TTY); 614/292-3162 (TTY); Fax: 614/292-5866

Project Number: H224A40001
Start Date: August 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $522,100; FY 93 $522,000; FY 94 $770,113; FY 95 $600,000; FY 96 $555,414; FY 97 $593,414; FY 98 $815,688

Abstract: This project represents consumers of assistive technology in the state of Ohio. It assists in the development and implementation of strategies to overcome barriers regarding access to, provision of, and funding for, assistive technology services and devices, with priority for identification of barriers to funding through state education (including special education), vocational rehabilitation services, medical assistance services, and, as appropriate, other health and human services, with particular emphasis on overcoming barriers for underrepresented and rural populations.

Oklahoma ABLE Tech

Oklahoma State University
1514 West Hall of Fame Road
Stillwater, OK 74078-2026
mljwell@okway.okstate.edu
http://www.okstate.edu/wellness/at-home.htm

Principal Investigator: Jim Rogers, Project Director, 405/744-7079 (V)
Public Contact: Linda Jaco, Project Manager, 800/257-1705 (V/TTY); 405/744-9748 (V); Fax: 405/744-2487

Project Number: H224A50007
Start Date: July 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $530,000; FY 93 $668,524 (includes carryover funding); FY 94 $530,000; FY 95 $575,000; FY 96 $532,272; FY 97 $570,272; FY 98 $695,237
Abstract: The mission of ABLE Tech is to facilitate systems change to enhance the provision of, access to, and funding for assistive technology so that individuals with disabilities can achieve their greatest potential. ABLE Tech conducts statewide project activities, including public awareness, training and technical assistance, funding and policy development, individual and systems advocacy, and project coordination. The project also provides regional information and referral, and legal advocacy.

Oregon Technology Access for Life Needs (TALN)

Oregon Disabilities Commission
c/o Access Technologies, Inc.
3070 Lancaster Drive Northeast
Salem, OR 97305-1396
ati@orednet.org

Principal Investigator: Byron McNaught, Project Director
Public Contact: 800/677-7512 (in state only); 503/361-1201 (V/TTY); Fax: 503/370-4530

Project Number: H224A50002
Start Date: April 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $540,000; FY 91 $555,000; FY 92 $575,000; FY 93 $620,000; FY 94 $670,000; FY 95 $670,000; FY 96 $620,212; FY 97 $658,212; FY 98 $493,659
Abstract: This project expands the availability of assistive technology in Oregon by using existing resources, including community colleges, medical, rehabilitation, educational, and recreational and adaptive sports programs, the state library system, federally funded technology projects currently in existence in Oregon, state agencies, and the Oregon Museum of Science and Industry. Projects include an exhibit to increase public awareness, a toll-free number for information and referral, training programs, equipment loan banks and demonstration labs, and a database on used equipment. The Regional Technology Information Centers are built into the funding structure of the community colleges.

Pennsylvania's Initiative on Assistive Technology (PIAT)

Temple University
Institute on Disabilities/UAP
Ritter Annex, Room 423
Philadelphia, PA 19122-6090
piat@astro.ocis.temple.edu
http://www.temple.edu/inst_disabilities

Principal Investigator: Diane Bryen, PhD
Public Contact: Amy S. Goldman, Project Director, 800/204-7428 (V); 800/750-7428 (TTY); 215/204-5968 (V/TTY); Fax: 215/204-9371

Project Number: H224A20006
Start Date: September 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $550,000; FY 93 $602,623; FY 94 $730,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,049,575
Abstract: This project focuses on the creation of a consumer responsive system, supported by combined public and private resources, through which Pennsylvanians with disabilities (including older Pennsylvanians) have access to the assistive technology services and supports they need to contribute to and participate fully in their communities. Major functional areas include public awareness, information and referral, individual advocacy and systems change, and training. PIAT has established a network of regional Assistive Technology Resource Centers (ATRCs). ATRCs are also a key to Pennsylvania's Assistive Technology Lending Library, a state funded program based on the pilot short-term equipment loan program established by PIAT. The Pennsylvania Assistive Technology Foundation was established with the assistance of PIAT, and can make cash loans for the purchase of assistive technology beginning in the Fall of 1998, as an independent 501(c) (3).

Puerto Rico Assistive Technology Project

University of Puerto Rico
Medical Sciences Campus
College of Health Related Professions
Office of Research and Development
Box 36[illegible]67
San Juan, PR 00936-5067
pratp@coqui.net

Principal Investigator: Maria I. Miranda, 787/764-6035 (V)
Public Contact: 800/496-6035 (V/TTY, from the U.S.); 800/981-6033 (V/TTY, from Puerto Rico); 787/758-2525, ext. 4402, 4406, 4413, 4412; 787/754-8034 (TTY); 787/767-8642 (V); Fax: 787/754-8034

Project Number: H224A70001
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $500,000; FY 94 $545,000; FY 95 $555,000; FY 96 $513,758; FY 97 $551,758; FY 98 $626,758
Abstract: This project establishes a comprehensive islandwide system of AT services to maximize and enhance existing resources in Puerto Rico. This system is timely and consumer-responsive to the needs of people with disabilities. The project's main focus is to influence the system through collaborative efforts with public and private agencies to guarantee equal opportunity and access to assistive technology by people with disabilities in Puerto Rico. The Assistive Technology Program is administered by the University of Puerto Rico, Medical Sciences Campus, Office of Research and Development.

Rhode Island Assistive Technology Access Partnership (ATAP)

Rhode Island Department of Human Services
Office of Rehabilitation Services
40 Fountain Street
Providence, RI 02903-1898
rcarroll@ors.state.ri.us; solson@atap.state.ri.us
http://www.ors.state.ri.us/assistiv.htm

Principal Investigator: Raymond A. Carroll, Administrator
Public Contact: Susan Olson, Project Director, 800/752-8088, ext. 2608 (V, in state only); 401/421-7005, ext. 310 (V); 401/421-7016 (TTY); Fax: 401/421-9259

Project Number: H224A30012
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $500,000; FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $538,000; FY 98 $624,467

Abstract: This project develops a consumer-responsive, coordinated partnership of Rhode Island resources by the organization of communication, training, and support linkages around assistive technology sites. Consumer participation has been integrated throughout the project and a consumer-majority advisory council oversees all aspects of the project. The project has facilitated the development of peer-support networks regarding assistive technology and has organized training workshops regarding specific assistive technology applications and advocacy issues. ATAP has been promoted in the community through brochures, a quarterly newsletter, training workshops, outreach, surveys, and a yearly conference. A resource guide on assistive technology developed by ATAP is a resource link to national and regional information sources. A coordinated training effort for consumers, ATAP staff, and service providers includes advocacy skill building, decision-making skills, awareness about specific technologies and low-tech solutions, and training that assists individuals to obtain and use devices.

South Carolina Assistive Technology Program (SCATP)

University of South Carolina School of Medicine
Center for Disability Resources
Columbia, SC 29208
scatp@scsn.net; evelyne@cdd.sc.edu; gingerj@cdd.sc.edu
http://www.scsn.net/users/scatp

Principal Investigator: Richard Ferrante, 803/777-7093 (V)
Public Contact: Evelyn Evans, Project Director, 803/935-5263 (V/TTY); Fax: 803/935-5342

Project Number: H224A60001
Start Date: October 1, 1991
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $541,767; FY 92 $541,767; FY 93 $595,767; FY 94 $720,000; FY 95 $720,000; FY 96 $667,000; FY 97 $704,497; FY 98 $829,535
Abstract: This project is the catalyst for uniting assistive technology services statewide into an easily accessible system that is responsive to the needs of all South Carolinians with disabilities. SCATP collaborates with state agencies, policy makers, and private entities to overcome barriers that prevent people from getting the devices and services they need for full and productive lives. Systems change activities are developed with a three-tiered approach: to state agency administrators, service providers, and consumers. Rather than direct provision of services, SCATP focuses on strengthening systems so that they are mutually reinforcing and self-sustaining beyond the life of the grant; the major funding streams of the Vocational Rehabilitation Department, Medicaid, the Department of Education, and private insurance are targeted. Systems change activities are connected to training and technical assistance activities, that are in turn supportive of systems change. All activities are guided by input and responsiveness to consumers and their families.

South Dakota Assistive Technology Project (DakotaLink)

DakotaLink
1925 Plaza Boulevard
Rapid City, SD 57702
dakotalink@tie.org
http://dakotalink.tie.net

Principal Investigator: Patty Warkenthein, 605/773-3195 (V)
Public Contact: Ron Reed, PhD, 800/645-0673 (V/TTY, in state only); 605/394-1876 (V/TTY); Fax: 605/394-5315

Project Number: H224A20019
Start Date: July 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $520,000; FY 93 $520,000; FY 94 $620,000; FY 95 $650,000; FY 96 $601,699; FY 97 $601,699; FY 98 $728,100
Abstract: To achieve systems change, DakotaLink works with consumers, state and private agencies, and organizations who provide services to, or advocate for, people with disabilities to identify and eliminate barriers to individuals receiving assistive technology devices or services in a timely manner. The project uses two mobile units, outreach coordinators, and training programs as a catalyst to: (1) reach the most underserved areas; (2) provide advocacy training for people with disabilities and their representatives; (3) continue use of the Native American Outreach Coordinator to reach specifically that underserved population; and (4) provide information support to all individuals regarding access to, provision of, and funding for assistive technology devices and services.

Tennessee Technology Access Project (TTAP)

Tennessee Department of Health
Cordell Hull Building, Fifth Floor
425 Fifth Avenue North
Nashville, TN 37241-4850
jcundall@mail.state.tn.us
http://www.state.tn.us/mental/ttap.html

Principal Investigator: Jacque Cundall, Project Director, 615/741-8350
Public Contact: Katie Wilson, Program Specialist, 800/732-5059 (V, in state only); 615/741-4566 (TTY); 615/741-0331; Fax: 615/741-1063

Project Number: H224A00003
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $550,000; FY 91 $553,675; FY 92 $553,675; FY 93 $640,800; FY 94 $665,000; FY 95 $665,000; FY 96 $615,584; FY 97 $653,584; FY 98 $490,188
Abstract: The Tennessee project emphasizes the implementation and pursuit of systems change and advocacy activities by developing an information/communication network, working with state agency policy values, and developing alternate funding mechanisms. The administrative/organizational structure involves consumers, and facilitates interagency cooperation and interaction with the private sector.

Texas Assistive Technology Partnership

University of Texas at Austin
Texas University Affiliated Program
SZB 252 - D5100
Austin, TX 78712-1290
s.elrod@mail.utexas.edu
http://tatp.edb.utexas.edu

Principal Investigator: Susanne Elrod, Project Director
Public Contact: John Moore, 800/828-7839 (V/TTY, in state only); 512/471-7621 (V); 512/471-1844 (TTY); Fax: 512/471-7549

Project Number: H224A20012
Start Date: August 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $550,000; FY 93 $550,000; FY 94 $550,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,167,518
Abstract: Major components include public policy advocacy and statewide systems change, protection and advocacy services (Advocacy, Inc., a protection and advocacy system), assistive technology and telecommunications access training, information and referral, and statewide public awareness activities.

U.S. Virgin Islands Technology-Related Assistance for Individuals with Disabilities (TRAID)

University of the Virgin Islands
Virgin Islands University Affiliated Program (VIUAP)
#2 John Brewer Bay
St. Thomas, USVI 00801-0990
yhabtes@uvi.edu

Principal Investigator: Yegin Habtes, PhD
Public Contact: 809/693-1323; Fax: 809/693-1325

Project Number: H224A50005
Start Date: October 1, 1995
Phase: 1st year of the first extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000
Other funding: FY 95 $6,400
Abstract: The Virgin Islands project disseminates necessary information on assistive technologies for people with disabilities and provides a venue for device demonstration through the establishment of two resource centers, on the islands of St. Thomas and St. Criox. The project is also initiating an assistive technology loan library.

Utah Assistive Technology Program (UATP)

Utah State University
Center for Persons with Disabilities
6855 Old Main Hill
Logan, UT 84322-6855
sharon@cpd2.usu.edu
http://www.uatp.usu.edu

Principal Investigator: Marvin G. Fifield, EdD, Project Director, 435/797-1982 (V)
Public Contact: 435/797-1981 (V/TTY); Fax: 435/797-2355

Project Number: H224A90051
Start Date: November 1, 1989
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $505,445; FY 90 $507,720; FY 91 $559,720; FY 92 $696,224; FY 93 $788,526; FY 94 $800,000; FY 95 $800,000; FY 96 $740,560; FY 97 $555,414; FY 98 $370,276
Abstract: The Utah Assistive Technology Program (UTAP) provides expertise, resources, and a structure to enhance and expand AT services provided by private and public agencies in Utah. This occurs through monitoring, coordination, information dissemination, empowering individuals, the identification and removal of barriers, and expanding state resources to assume these essential activities as federal funding under the Tech Act is phased out. Primary components of UTAP include: (1) the Utah Center for Assistive Technology, a statewide service hub; (2) Assistive Technology Access Centers located in rural independent living centers; (3) outreach to those over the age of 65 years and their service providers; (4) the Utah Assistive Technology Foundation providing low-interest loans to consumers; (5) the Consumer Council whose primary interest is to identify barriers; (6) the Management and Implementation Board, made up of state service agency representatives (usually the director) that take appropriate action to remove barriers; (7) consumer technical services provided by the Assistive Technology Development and Fabrication Laboratory at Utah State University; and (8) an equipment reutilization program.

Vermont Assistive Technology Project

Vermont Department of Aging and Disabilities
103 South Main Street, First Floor
Waterbury, VT 05671-2305
lynnec@dad.state.vt.us
http://www.dad.state.vt.us/atp

Principal Investigator: Lynne Cleveland, Project Director
Public Contact: 800/750-6355 (V/TTY, in state only); 802/241-2620 (V/TTY); Fax: 802/241-2174

Project Number: H224A00023
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $553,048; FY 91 $560,577; FY 92 $581,417; FY 93 $705,000; FY 94 $700,000; FY 95 $700,000; FY 96 $647,983; FY 97 $685,983; FY 98 $514,487
Abstract: The Vermont Assistive Technology Project encompasses a state coordinating council for assistive technology issues; regional centers for demonstration, trial, and technical support with computer and augmentative communication equipment; and regional seating and positioning centers. The project affects change in policies and procedures of public and private agencies, and maintains a used equipment recycling program. It supports an annual computer training institute for educators and an annual recreation equipment expo. The project continues to expand Web access to AT information and resources, and to integrate AT knowledge and expertise into existing public and private agencies.

Technical Assistance Grant

RESNA
1700 North Moore Street, Suite 1540
Arlington, VA 22209-1903
resnata@resna.org
http://www.resna.org/hometa1.htm

Principal Investigator: James R. Geletka, Executive Director
Public Contact: Nell Bailey, Project Director, 703/524-6686, ext. 313 (V); 703/524-6639 (TTY); Fax: 703/524-6630

Project Number: H224A50006
Start Date: October 1, 1995
Phase: 1st year of the 1st extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 95 $749,925; FY 96 $749,925; FY 97 $749,925; FY 98 $749,925
Abstract: This grant: (1) provides resources for states and territories receiving funding under P.L. 103-218 and for other states to develop and implement their technology-related assistance programs, (2) publishes information bulletins and other written materials, (3) designs an evaluation package to analyze states' progress toward a consumer-responsive delivery system, (4) develops a database of Tech Act project products and activities, (5) hosts meetings and regional workshops designed to meet the needs of states, (6) conducts teleconferences, and (7) brings together experts who can provide ongoing support to states and individuals.

Virginia Assistive Technology System (VATS)

Virginia Department of Rehabilitative Services
8004 Franklin Farms Drive
Richmond, VA 23288-0300
vatskhk@aol.com
http://www.vats.org

Principal Investigator: Kenneth Knorr, Project Director
Public Contact: 800/435-8490 (V/TTY, in state only); 804/662-9040 (V/TTY); 800/210-5414 (BBS); Fax: 804/662-9532

Project Number: H224A00009
Start Date: June 1, 1990
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $550,000; FY 91 $562,500; FY 92 $578,883; FY 93 $685,331; FY 94 $663,467; FY 95 $745,000; FY 96 $689,639; FY 97 $727,639; FY 98 $545,729
Abstract: The Virginia Assistive Technology System (VATS) provides coordination at three levels: state policy, through the mechanism of interagency agreements; project management, through the mechanism of the advisory council; and at the local and regional level, through four assistive technology regional sites. Activities include information and referral services, technical assistance, training materials and seminars, and creative grant programs and policy development. The project has produced a textbook, *Assistive Technology: A Resource for School, Work, and Community* (Brookes Publishing) and a *National Study of Loan Financing Programs.*

Washington Assistive Technology Alliance (WATA)

AT Resource Center
University of Washington
P.O. Box 357920
Seattle, WA 98195-7920
uwat@u.washington.edu
http://wata.org

Principal Investigator: Jeanne Munro, 360/438-8008 (V); 360/438-8644 (TTY)
Public Contact: Debbie Cook, Project Director, 800/841-8345 (V/TTY, in state only); 206/685-4181 (V); 206/616-1396 (TTY); Fax: 206/543-4779

Project Number: H224A30006
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $525,090; FY 94 $580,000; FY 95 $600,000; FY 96 $555,414; FY 97 $593,414; FY 98 $739,639
Abstract: Activities for this project include information, consultation, and training related to selection of technology devices, services, and funding; legal advice and advocacy; policy development; legislative action; technical consultation and training; publications; and online resources. WATA is a consumer advocacy network that includes the AT Resource Center at the University of Washington, the AT Resource Center at Easter Seal Society in Spokane, and the Washington Protection and Advocacy System. The project is administered by the state Division of Vocational Rehabilitation with guidance from the Consumer Majority Advisory Board.

West Virginia Assistive Technology System (WVATS)

University Affiliated Center for Developmental Disabilities
Airport Research and Office Park
955 Hartman Run Road
Morgantown, WV 26505
stewiat@wvnvm.wvnet.edu
http://www.wvu.edu/~uacdd/wvat.htm

Principal Investigator: Janice A. Holland, 304/766-4694 (V)
Public Contact: Jack Stewart, Project Director, 800/841-8436 (V/TTY, in state only); 304/293-4692 (V/TTY); Fax: 304/293-7294

Project Number: H224A20011
Start Date: July 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $530,000; FY 93 $530,000; FY 94 $620,000; FY 95 $620,000; FY 96 $573,928; FY 97 $611,928; FY 98 $716,068
Abstract: The WVATS project seeks to improve the availability of assistive technology (AT) by improving existing AT services, facilitating coordination of AT service-delivery programs, identifying and remediating gaps in services, and promoting, developing, and/or delivering new services. These systemic changes are carried out in response to and consonant with consumer advice, direction, and consent. The West Virginia project has a board composed primarily of consumers and their families. State organizations and agencies provide guidance, structure, and input. WVATS uses a "core" system directed by a board, overseen by the Division of Rehabilitation Services, and managed on a day-to-day basis by the West Virginia University Affiliated Center for Developmental Disabilities. WVATS supports program staff, an information and referral system with a toll-free number, two resource centers, a statewide awareness campaign, training programs, and seven regional technology-related assistance teams.

WisTech: Technology-Related Assistance for Individuals with Disabilities

Wisconsin Assistive Technology Program
Division of Supported Living
2917 International Lane, Third Floor
P.O. Box 7852
Madison, WI 53707-7852
trampju@dwd.state.wi.us
http://www.dhfs.state.wi.us/Aging/wistech/wistech.html

Principal Investigator: Judy Trampf, Project Director
Public Contact: 608/243-5674 (V/TTY); Fax: 608/243-5681

Project Number: H224A00013
Start Date: May 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $572,871; FY 91 $575,000; FY 92 $590,313; FY 93 $685,488; FY 94 $730,000; FY 95 $730,000; FY 96 $675,754; FY 97 $713,754; FY 98 $535,315
Abstract: The Wisconsin initiative focuses on systems change through a combination of state policy focus, use of the state's Protection and Advocacy Agency (Wisconsin Coalition for Advocacy), and the state's independent living centers (ILCs). The ILCs, in eight regions of the state, provide advocacy for consumers in related assistive technology cases at the local level. Cases of significance or that require technical assistance are referred to the Protection and Advocacy Agency, or the state program for advocacy work. WisTech continues to optimize consumer control and involvement by obtaining direction from its state consumer advisory board, which is made up of 51 percent consumers or parents. WisTech works to obtain additional state money to finance a consumer assistive technology loan program and to continue to fund the assistive technology loan/try-out programs at the ILCs.

Wyoming's New Options in Technology (WYNOT)

University of Wyoming
Wyoming Institute for Disabilities (WIND)
1465 North Fourth Street, Suite 111
Laramie, WY 82072
wynot.uw@uwyo.edu
http://wind.uwyo.edu/wynot/wynot.htm

Principal Investigator: Darrell Purdy, Project Director
Public Contact: 307/766-2084 (V/TTY); Fax: 307/721-2084

Project Number: H224A60002
Start Date: October 1, 1993
Phase: 2nd year of the 1st extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $620,502
Abstract: Wyoming New Options in Technology (WYNOT) is a project designed to develop and implement a consumer directed statewide system of technology-related assistance for people with disabilities of all ages. The Assistive Technology Advisory Council (ATAC), which consists of consumers or their parents or representatives, oversees project goals. The remainder of the ATAC consists of state agency representatives and vendors who can influence systems change and advocacy activities. Systems Change Teams (SCTs), located throughout the state, gather and disseminate information on a local basis and help identify barriers. Protection and Advocacy (P&A) conducts advocacy training and provides legal representation for people with disabilities who have been denied access to assistive technology services or devices. WYNOT provides information and referral services; operates an equipment loan bank and an equipment exchange program; provides financial resource information, outreach services, and statewide training on assistive technology issues; and disseminates systems change information.

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Academic Software, Inc.	RW980370	Lexington, KY	6-33
Adaptive Environments Center, Inc.	H133D40019	Boston, MA	6-20
Adaptive Environments Center, Inc.	H133D60015	Boston, MA	6-21
Adrian A. Polliack, PhD	H133F80013	Los Angeles, CA	7-7
Alabama Department of Rehabilitation Services	H224A30009	Montgomery, AL	8-1
Alaska Department of Education	H224A00002	Anchorage, AK	8-2
American Speech-Language-Hearing Association	H133G70055	Rockville, MD	2-71
Applied Science and Engineering Laboratories University of Delaware	H133E30013	Wilmington, DE	3-3
Applied Science and Engineering Laboratories University of Delaware	H133P30003	Wilmington, DE	7-13
Applied Science and Engineering Laboratories University of Delaware	H224A10005	Wilmington, DE	8-9
The Arc	H133G50178	Arlington, TX	4-24
Arkansas Rehabilitation Services	H224A90020	Little Rock, AR	8-5
Arlyn Toolworks	RW97077001	Carlisle, PA	3-51
Aryln Toolworks	ED-98-PO-3544	Carlisle, PA	3-44
AT Resource Center	H224A30006	Seattle, WA	8-56
Baltimore Regional Burn Center	H133A70025	Baltimore, MD	2-23
Baylor College of Medicine	H133A60045	Houston, TX	2-19
Baylor College of Medicine	H133A980058	Houston, TX	2-20
Baylor College of Medicine	H133A980073	Houston, TX	2-21
Baylor College of Medicine	H133B40011	Houston, TX	4-10
Baylor College of Medicine	H133G70078	Houston, TX	2-87
Baylor College of Medicine	H133G70103	Houston, TX	2-88
Beneficial Designs, Inc.	ED-98-CO-0046	Santa Cruz, CA	6-32
Boston University	H133B40024	Boston, MA	2-10
Boston University	H133G80124	Boston, MA	1-22
Boston University	H133P70014	Boston, MA	7-16
Boston University Medical Center Hospital	H133N50014	Boston, MA	2-33
California Department of Rehabilitation	H224A30008	Sacramento, CA	8-6
California School of Professional Psychology-San Diego (CSPP-SD)	H133B70016	San Diego, CA	1-2
California State University	H133G80119	Los Angeles, CA	4-13
Case Western Reserve University	H133N50018	Cleveland, OH	2-39
Catholic University of America	H133E980025	Washington, DC	3-5
Center for Assistive Technology	H133E980024	Buffalo, NY	3-10
Center on Disabilities and Human Development: Idaho's UAP	H224A20017	Moscow, ID	8-16
Cerebral Palsy Research Foundation of Kansas	H133G80077	Wichita, KS	6-15
Charlotte-Mecklenburg Hospital Authority	H133A980025	Charlotte, NC	2-55

Children's Hospital	H133B30067	Boston, MA	1-7
Children's Hospital	H133B980037	Boston, MA	1-6
Children's Hospital	H224A00036	Boston, MA	8-25
CNMI Governor's Developmental Disabilities Council	H224A40007	Saipan, MP	8-40
Community Options, Inc.	H133B980042	Washington, DC	1-4
Connecticut Department of Social Services	H224A20013	Hartford, CT	8-8
Conwal, Inc.	ED-98-CO-0004	McLean, VA	7-1
Cornell University	H133A70005	Ithaca, NY	1-16
Cornell University	H133B980038	Ithaca, NY	1-10
Craig Hospital	H133A980020	Englewood, CO	2-47
Craig Hospital	H133G80011	Englewood, CO	2-65
Craig Hospital	H133N50001	Englewood, CO	2-30
DakotaLink	H224A20019	Rapid City, SD	8-48
Dartmouth Medical School	H133G70031	Lebanon, NH	2-81
Division of Vocational Rehabilitation	H224A30014	Pago Pago, American Samoa	8-3
Drake University	H133G60187	Des Moines, IA	1-21
Duke University	H133E980026	Durham, NC	3-12
Education Development Center, Inc.	H133G70143	Newton, MA	3-26
Emory University	H133A980028	Atlanta, GA	2-48
Enkidu Research, Inc.	ED-98-CO-0031	Lockport, NY	3-50
Eugene Research Institute	H133G80095	Eugene, OR	3-32
Exploding Myths, Inc.	H133A980045	San Diego, CA	6-4
FAAST, Inc.	H224A20014	Tallahassee, FL	8-12
Fillauer, Incorporated	ED-98-PO-3527	Chattanooga, TN	3-37
Gallaudet University	H133E50002	Washington, DC	3-4
Gary L. Albrecht, PhD	H133F80021	Northbrook, IL	7-4
Georgia C. Frey, PhD	H133F80012	College Station, TX	7-11
Georgia Department of Human Resources	H224A10001	Atlanta, GA	8-13
Gustavus Adolphus College	H133G80055	St. Peter, MN	2-79
Hawaii Department of Vocational Rehabilitation Services for the Blind and Physically Handicapped	H224A10023	Honolulu, HI	8-15
Helen Hayes Hospital Center for Rehabilitation Technology	H133G50018	West Haverstraw, NY	2-83
Howard University	H133B30093	Washington, DC	1-3
Hunter College of CUNY	H133G60101	New York, NY	1-25
IATP	H224A90038	Springfield, IL	8-17
Inclusive Technologies	ED-98-PO-3533	Matawan, NJ	3-41
InfoUse	H133D50017	Berkeley, CA	6-1
Institute for Human Development	H224A40002	Flagstaff, AZ	8-4
Institute for Learning and Development	ED-98-PO-3748	Chelmsford, MA	4-26
The Institute for Rehabilitation and Research (TIRR)	H133A70015	Houston, TX	2-59

The Institute for Rehabilitation and Research (TIRR)	H133B40002	Houston, TX	2-13
The Institute for Rehabilitation and Research (TIRR)	H133B50003	Houston, TX	4-11
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Intelligenta, Inc.	ED-98-PO-4645	Friendswood, TX	3-45
International Braille Research Center	H133G80103	Louisville, KY	3-24
International Management, Development, and Training, Inc.	ED-98-PO-3777	Alexandria, VA	3-46
Iowa University Affiliated Program	H224A00028	Iowa City, IA	8-19
James Allen Blackman, MD, MPH	H133F80004	Charlottesville, VA	7-5
Jane K. Sweeney, PhD, PT, PCS	H133F80038	Gig Harbor, WA	7-6
Jean Whitney-Thomas, PhD	H133F80016	Boston, MA	7-8
Jewish Employment and Vocational Service	H133G80099	Laverock, PA	1-26
John D. Banja, PhD	H133F80025	Atlanta, GA	7-3
Kay Schriner, PhD	H133F80030	Fayetteville, AR	7-2
Kellie Kirksey	H133F80034	Boardman, OH	7-9
Kentucky Department for the Blind	H224A90002	Louisville, KY	8-21
Kessler Medical Rehabilitation Research and Education Corporation	H133A980030	West Orange, NJ	2-54
KRA Corporation	HN96001001	Silver Spring, MD	6-19
KRA Corporation	HN970020	Silver Spring, MD	6-8
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The Lexington Center for the Deaf	H133E980010	Jackson Heights, NY	3-11
The Lexington Center for the Deaf	H133G70122	Jackson Heights, NY	3-29
Los Amigos Research and Education Institute, Inc. (LAREI)	H133B70011	Downey, CA	2-3
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Macro International, Inc.	H133G80048	Calverton, MD	6-16
Macro International, Inc.	HN96015001	Silver Spring, MD	6-7
Maine Department of Education	H224A90047	Augusta, ME	8-23
Maryland Governor's Office for Individuals with Disabilities	H224A90019	Baltimore, MD	8-24
Massachusetts Department of Public Health	H133G60037	Boston, MA	4-19

Massachusetts General Hospital Corporation	H133G60045	Boston, MA	2-72
Massachusetts Rehabilitation Commission Psychiatric Rehabilitation Training Program	H133G70098	Boston, MA	1-23
Matrix Research Institute	H133B70007	Philadelphia, PA	1-12
Matrix Research Institute	H133G80084	Philadelphia, PA	1-27
Mayo Medical Center	H133A980036	Rochester, MN	2-51
Medical College of Wisconsin	H133N50024	Milwaukee, WI	2-44
Medlantic Research Institute	H133B70003	Washington, DC	2-5
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Meeting the Challenge, Inc.	H133D60010	Colorado Springs, CO	6-28
Meeting the Challenge, Inc.	H133G80013	Colorado Springs, CO	6-11
MetroHealth Center for Rehabilitation	H133G50067	Cleveland, OH	2-85
Michigan Disability Rights Coalition	H224A50009	East Lansing, MI	8-26
Mississippi Department of Rehabilitation Services	H224A00032	Jackson, MS	8-28
Mississippi Methodist Rehabilitation Center	H133A980035	Jackson, MS	2-52
Mississippi Methodist Rehabilitation Center	H133A980067	Jackson, MS	2-17
Mississippi State University	H133B60001	Mississippi State, MS	1-8
Missouri Department of Labor and Industrial Relations	H224A30015	Independence, MO	8-29
MossRehab	H133A70033	Philadelphia, PA	2-58
Mount Sinai Medical Center	H133N50008	New York, NY	2-38
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National League of Cities	H133D50011	Washington, DC	6-18
National Rehabilitation Hospital Research Center	H133G80031	Washington, DC	1-18
Nebraska Department of Education	H224A90040	Lincoln, NE	8-31
Nevada Rehabilitation Division	H224A00037	Carson City, NV	8-32
New England Medical Center	H133B50006	Boston, MA	2-9
New Jersey Protection and Advocacy, Inc.	H224A20007	Trenton, NJ	8-34
New Mexico State Department of Education	H224A00017	Santa Fe, NM	8-35
New York State Office of Advocate for Persons with Disabilities	H224A00041	Albany, NY	8-36
North Carolina Department of Health and Human Services	H224A00010	Raleigh, NC	8-37
North Carolina State University School of Design	H133E40003	Raleigh, NC	3-13
North Carolina State University School of Design	H133G80060	Raleigh, NC	3-30

North Dakota Department of Human Services	H224A30003	Cavalier, ND	8-39
Northern Arizona University	H133B980049	Flagstaff, AZ	5-1
Northwestern University	H133E980023	Chicago, IL	3-6
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Northwestern University	H133P80014	Chicago, IL	7-14
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Ohio State University	H133E30009	Columbus, OH	3-14
Ohio State University	H133G80100	Columbus, OH	2-86
Ohio State University Research Foundation	H224A40001	Columbus, OH	8-41
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Oklahoma State University	H224A50007	Stillwater, OK	8-42
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Portland State University	H133B40021	Portland, OR	4-9
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Rehabilitation Institute of Michigan	H133G50138	Detroit, MI	2-75
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Research Triangle Institute (RTI)	HN970510	Research Triangle Park, NC	8-38
RESNA	H224A50006	Arlington, VA	8-54
Rhode Island Department of Human Services	H224A30012	Providence, RI	8-46
Richard C. Baron	H133F80011	Philadelphia, PA	7-10
Ross Computational Resources, LLC	ED-98-PO-3537	Madison, WI	3-47
Rural Institute on Disabilities	H224A10002	Missoula, MT	8-30
San Diego State University Foundation	H133B40034	San Diego, CA	4-3
Santa Clara Valley Medical Center (SCVMC)	H133A70018	San Jose, CA	2-46

Santa Clara Valley Medical Center (SCVMC)	H133G50013	San Jose, CA	2-64
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Shepherd Center, Inc.	H133G70111	Atlanta, GA	2-67
Shepherd Center, Inc.	H133N50022	Atlanta, GA	2-31
Smith-Kettlewell Eye Research Institute	H133E50001	San Francisco, CA	3-2
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Southwest Educational Development Laboratory (SEDL)	H133D50016	Austin, TX	6-10
Spaulding Rehabilitation Hospital	H133A980034	Boston, MA	2-49
State of Minnesota	H224A90041	St. Paul, MN	8-27
State University of New York (SUNY)/Buffalo	H133E60006	Buffalo, NY	3-9
State University of New York (SUNY)/Buffalo	H133G70156	Buffalo, NY	2-82
State University of New York (SUNY)/Buffalo Research Foundation	H133G60203	Amherst, NY	3-28
SUNY /Albany	H133G980104	Albany, NY	4-20
Syracuse University	H133D50037	Syracuse, NY	6-9
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TeleSonic Division of Associated Enterprises, Inc.	ED-98-CO-0055	Annapolis, MD	3-49
Temple University	H224A20006	Philadelphia, PA	8-44
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Thomas Jefferson University	H133N50021	Philadelphia, PA	2-40
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TransCen, Inc.	H133D60006	Rockville, MD	6-23
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United Cerebral Palsy Associations, Inc.	H133A980052	Washington, DC	6-5
United Cerebral Palsy Associations, Inc.	H133D60018	Atlanta, GA	6-24
United Cerebral Palsy Associations, Inc.	H133G80030	Washington, DC	1-19
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University Affiliated Center for Developmental Disabilities	H224A20011	Morgantown, WV	8-57
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University of Florida College of Heath Professions	H133G60087	Gainsville, FL	4-18
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University of Guam	H224A40003	Mangilao, GU	8-14
University of Hawaii at Manoa	H133B980043	Honolulu, HI	1-5
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